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North Carolina Dental Society

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Below are some of the advantages in your State Society's Group Plan not offered by any other Group Plan, or individually in the open market.

- (a) Five years protection for each sickness.
- (b) Up to \$1,200.00 for fractures, or dislocations even though they do not cause disability to practice
- (c) Optional hospital and/or surgical benefits
- (d) All claims paid promptly by J. L. Crumpton, Durham, N. C. without red tape of sending to some distant office, or to some unknown person for handling

**More Than \$110,000.00 in Benefits Already Paid to North Carolina
Dental Society Members Insured Under This Plan**

Plans Available

	<i>Accidental Death</i>	<i>Dismemberment Benefits, Up to</i>	<i>Accident and Sickness Benefits</i>	<i>Annual Premium</i>	<i>Semi-Annual Premium</i>
Plan 1	\$2,500. Principal	\$ 5,000.00	\$25.00 weekly	\$45.00	\$23.00
Plan 2	5,000. Principal	10,000.00	50.00 weekly	90.00	45.50
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A Surgical Operation Schedule is also available which provides payments up to a maximum limit of \$225.00 for any one surgical procedure. The additional premium charge for this coverage is \$10.00 Annually, or \$5.00 semi-annually. *This optional coverage is only available to applicants under age 60, who are in good health and qualify for it.*

Remember you cannot obtain coverage after the loss occurs. If you are not already insured in your Society Group write for information today.

J. L. CRUMPTON, State Manager

Professional Group Disability Division

Box 147, Durham, N. C.

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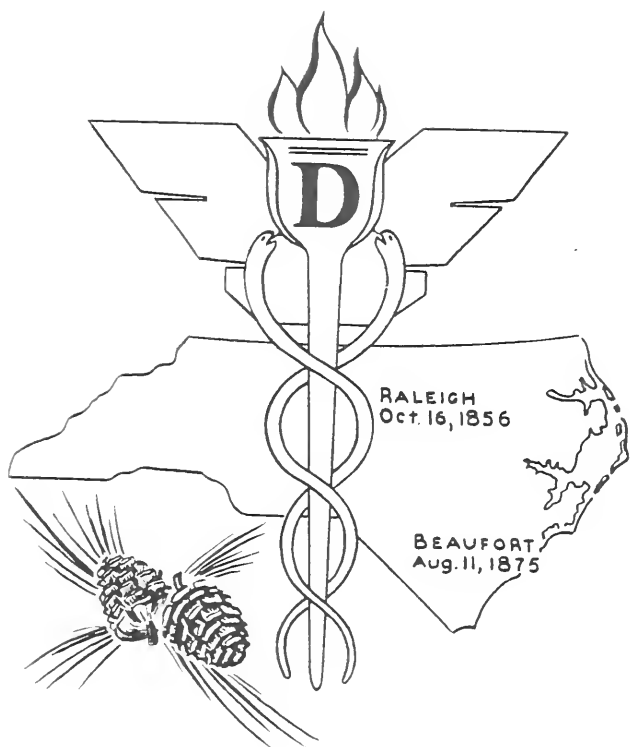
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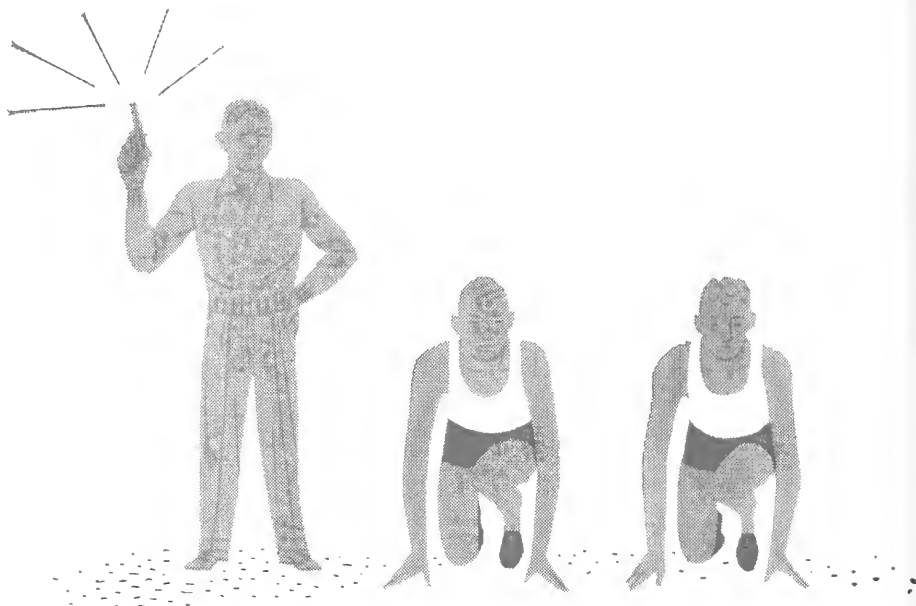
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NORTH CAROLINA DENTAL SOCIETY



Program Issue



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THE JOURNAL

of

THE NORTH CAROLINA DENTAL SOCIETY

(Component of the American Dental Association)

Officers
1952-53

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Gastonia

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☆

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Greensboro

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Bernard N. Walker
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Charlotte

VOLUME 36

APRIL, 1953

NUMBER 3

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Marvin R. Evans, Editor
Chapel Hill

The closing dates for the Journal are, February 10, July 10, and November 10.
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DR. JOHN L. ASHBY

Dr. Ashby has exerted a profound influence upon dentistry and his community, and has been honored by many organizations. His ideals and principles have been translated into action to serve his profession and fellowmen.



DR. A. C. CURRENT
President



DR. NEAL SHEFFIELD
President-Elect



DR. BERNARD WALKER
Secretary-Treasurer



DR. CHARLES I. MILLER
Vice-President

THE PROGRAM AT A GLANCE

Sunday, May 17, 1953

Afternoon	Evening
1:00 Registration Golf Tournament	8:00 General Session 8:45 Conjoint Session 9:30 House of Delegates

Monday, May 18, 1953

Morning	Afternoon	Evening
8:30 Registration	2:00 Dr. J. F. Volker	8:00 Election of Officers
9:45 General Session	3:30 Dr. J. W. R. Norton	9:00 House of Delegates
11:00 Dr. O. W. Brandhorst	4:00 Dr. J. E. Fauber	
11:45 Dr. Shailer Peterson		

Tuesday, May 19, 1953

Morning	Afternoon	Evening
8:00 Breakfast Confer- ences	2:00 Dr. Marvin E. Chapin	7:00 Banquet
9:00 Table Clinics	3:00 Dr. Harrison M. Berry, Jr.	9:00 Dance

Wednesday Morning, May 20, 1953

9:30 Dr. Harrison M. Berry	10:15 House of Delegates General Meeting Installation of Officers Adjournment
----------------------------	--

General Information

Registration

The registration desk will be in the foyer of the Carolina Hotel. It will open Sunday afternoon, May 17, at one o'clock.

Members will please fill out a card and have it checked by your district secretary before presenting it for your lapel badge. This procedure will save time during the peak hour of registration on Monday morning.

All guests and exhibitors are expected to register at the registration desk.

Golf

The Golf Tournament will begin Sunday afternoon, May 17, promptly at one o'clock.

The committee under the direction of Dr. Wade Breeland, chairman, assures us that no effort has been spared to make this year's tournament one of the best. The Golf Committee urges every dentist who plays golf to take part in this activity which has been planned for your pleasure.

Banquet and Dance

A most cordial welcome is extended to the members and guests to attend the annual banquet and dance Tuesday evening.

Dr. E. A. Branch will be the guest of honor this year, and Mr. Charles Jonas, Republican Representative from the Tenth Congressional District will be featured speaker.

Tickets to the banquet will be furnished by the Carolina Hotel to their guests, and those who are not registered at the hotel may secure tickets at the desk.

Dr. Grady Ross, Chairman of the Entertainment Committee assures us that a most enjoyable evening of music for dancing will be offered. Dress for the dance is optional.

Breakfast Conferences.

Past Presidents: All Past Presidents attending the meeting are especially invited and urged to meet together for breakfast Tuesday morning at eight in the Crystal Room. Dr. R. Fred Hunt will preside.

District Officers: Will meet Tuesday morning at eight o'clock in the Children's Dining Room with Dr. Neal Sheffield. All district officers are requested to attend this breakfast and plan the work for the coming year.

New Members: All members who have joined the society during the past year are especially urged to be present at breakfast in the Stag Room at eight o'clock Tuesday morning. The purpose of this conference is to have an opportunity to welcome the new men into the fellowship of the society. Dr. A. C. Current will preside.

Commercial Exhibits

Dr. Wells has reported that the Commercial Exhibitors will have the newest dental equipment and supplies on display. You are urged to visit and register with them.

Again this year there will be a drawing for approximately \$300.00 worth of prizes. This drawing will take place Tuesday afternoon at five o'clock, and you must be present to win. Only dentists are eligible.

For the Ladies

The programs for the North Carolina Dental Auxiliary, the Dental Hygienists' Association and the Dental Assistants Association will be found listed elsewhere. There are planned programs for all three groups, so bring your lady to Pinehurst with you.



DR. S. E. MOSER

Chairman, Program Committee

Welcome

On behalf of the North Carolina Dental Society Program Committee a cordial welcome is extended to you.

Our objectives are to present essays and clinics for your enrichment. We have made an earnest effort to bring new ideas, new viewpoints, and recent developments to your attention. It is our sincere hope that you will enjoy a refreshing and stimulating experience and receive inspiration for the development of higher standards.



DR. BRANDHORST

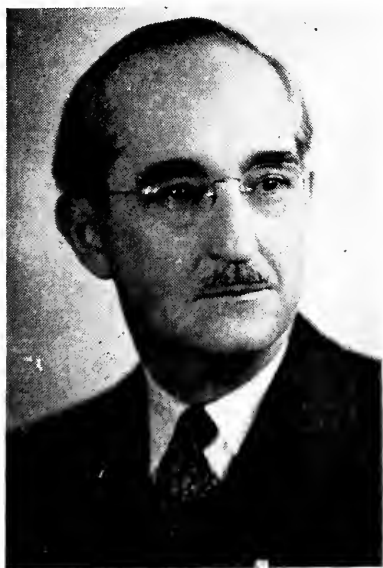
OTTO W. BRANDHORST, D.D.S.

Dr. Brandhorst received his D.D.S. at Washington University in 1915, and upon graduation continued his association with the university as an instructor, and later as Professor of Dental Histology and Orthodontics. He has served as Dean of this institution since 1945.

His many outstanding contributions to organized dentistry well qualify him for his position as President of the American Dental Association.

J. E. JOHN, SR., D.D.S.

Dr. John of Roanoke, Virginia is Trustee from the Fifth District of the American Dental Association. He will be on the program Monday to bring us "Greetings from the A.D.A."

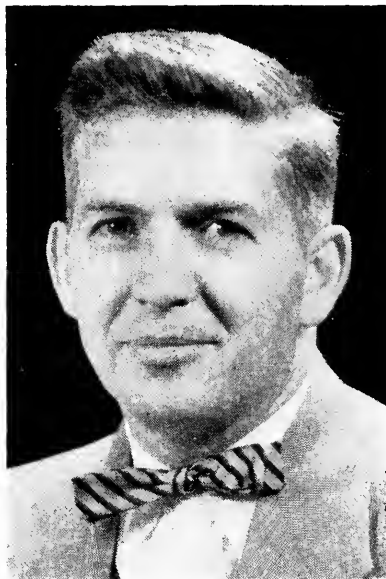


DR. JOHN

ESSAYS

Monday

THE PHYSICAL AND BIOLOGICAL PROPERTIES OF RESTORATIVE MATERIALS



J. F. VOLKER, D.D.S., A.B., M.S., Ph.D.

After an internship in dental surgery at Mountainside Hospital in Montclair, New Jersey, Dr. Volker held Carnegie fellowships at the University of Rochester School of Medicine and Dentistry where he did basic research in the etiology of dental caries and ultimately became Assistant Professor in the Department of Biochemistry at the University of Rochester School of Medicine. In 1942, he was appointed Professor of Clinical Dentistry at Tufts College Dental School, a position he held until his appointment as Dean of the Tufts College Dental School in 1947. In 1948, he became Dean of the new University of Alabama School of Dentistry.

Synopsis: Current dental researches have made it necessary for us to revive many of our restorative concepts. It has been demonstrated that the thermal coefficient of expansion of filling materials is of great importance. The belief that an hermetically sealed margin can be attained is not supported by experimental evidence and cavity margin "percolation of" oral fluids is a consistent occurrence. Similar findings have been demonstrated with radioactive isotopes. The latter techniques have also been used to show that some restorative materials are permeable to soluble substances. Other clinical researches suggest that the nature of restorative materials may influence the possibility of caries re-occurrence around fillings.

ESSAYS

Monday

HOW DENTAL EDUCATION SERVES THE PROFESSION



SHAILER PETERSON, B.A., M.A., Ph.D.

Dr. Peterson was graduated from the University of Oregon in 1930 and received his M.A. from the same institution in 1932 with his major in the field of chemistry. In 1944 he received his Ph.D. from the University of Minnesota with his major in education, with special emphasis on science teaching methods and curriculum development. Dr. Peterson has had a wide range of educational experiences including teaching in the College of Education at the University of Minnesota; directorship of educational research and measurements at the South Dakota State College of Agriculture; Examinations Staff of the U. S. Armed Forces Institute at the University of Chicago; Research Consultant, Extension Division, U. S. Department of Agriculture; Director of educational measurements for the A.D.A. Council of Dental Education, and at present is secretary for the Council on Dental Education.

ESSAYS

Monday

NORTH CAROLINA'S ADVANCING DENTAL HEALTH PROGRAM



J. W. R. NORTON, M.D.

Dr. Norton received his A.B. degree from Duke University in 1920. Later he attended the University of North Carolina Medical School and received his M.D. degree from Vanderbilt University.

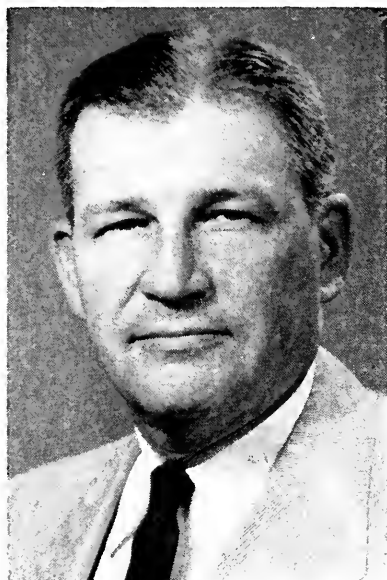
Since graduation he has held many important positions including City Health Superintendent of Rocky Mount, North Carolina; Assistant Division Director, State Board of Health; and Professor of Public Health Administration at the University of North Carolina.

At present Dr. Norton is North Carolina State Health Officer.

ESSAYS

Monday

THE DENTAL PROGRAM OF THE VETERANS ADMINISTRATION



J. E. FAUBER, D.D.S., M.P.H., F.A.C.D.

Dr. Fauber received his D.D.S. from the University of Pennsylvania, and his M.P.H. from Johns Hopkins University. He has served with the Department of Medicine and Surgery of the Veterans Administration for seven years in the various assignments of Assistant Chief and Chief of Dental Division in the Branch Office, and Assistant Director of Dental Service in the Central Office. In September of 1952, he was appointed Assistant Chief Medical Director for Dental Service in charge of the entire program. Prior to his service with the Veterans Administration, Dr. Fauber served with the U. S. Army and the Health Department of the Panama Canal.

Synopsis: A discussion on the development of the Dental Program of the Veterans Administration to meet the needs of an increasing veterans population.

ESSAYS

Tuesday

DENTISTRY MORE THAN TEETH



MARVIN E. CHAPIN, D.D.S., F.I.C.D.

Dr. Chapin, Professor and Head of the Department of Oral Surgery at the University of North Carolina, School of Dentistry, received his Doctor of Dental Surgery degree at Loyola University, Chicago, and upon graduation interned at Forsyth Dental Infirmary for Children. In 1940, Dr. Chapin returned to Loyola University where he remained on the teaching staff until he joined the faculty of the University of North Carolina.

Synopsis: This discussion will be profusely illustrated with Kodachrome slides of numerous systemic conditions which are manifested in the mouth and adjacent structures.

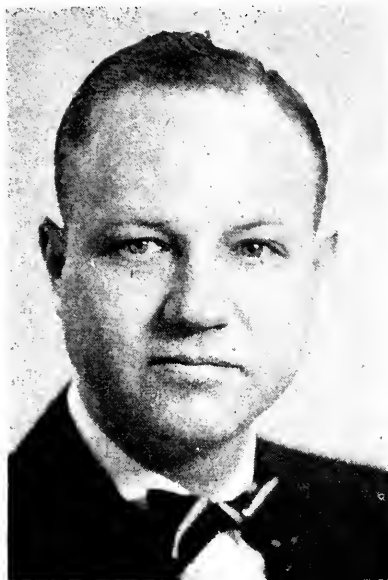
ESSAYS

Tuesday

ROENTGENOGRAPHIC CYSTS OF THE JAWS

Wednesday

ROENTGEN RADIATION



HARRISON M. BERRY, JR., D.D.S., M.S.

Dr. Berry received both degrees from the University of Pennsylvania where he is at present Assistant Professor of Oral Roentgenology. He is an instructor in Clinical Roentgenology in the Graduate School of Medicine at the University of Pennsylvania, and is serving as Chief of Roentgenology, Dental Department, on the staff of Philadelphia General Hospital.

Synopsis: Roentgenographic interpretation of cystic lesions frequently seen in dental patients.

Synopsis: Monitoring for stray radiation in the dental office; responsibility of the dentist for patients undergoing radiation therapy of the face and jaws.

TABLE CLINICS

Tuesday, May 19

9:00 A.M.-12:00 Noon

Ballroom

Operative

- "Non-Pressure Technic for the Insertion of Acrylic Restorations"
J. E. Derby, D.D.S.—Tryon
- "Jacket Preparation" A. C. Current, Jr., D.D.S.—Gastonia
Clay Poindexter, D.D.S.—Greensboro
- "Additional Life and Comfort to Your Restorations"
Ervin M. Funderburk, D.D.S.—Charlotte
- "Plastic Anterior Bridgework" J. J. Lauten, D.D.S.—Greensboro
- "Restoration of Hopeless Vital Deciduous Teeth"
James Graham, D.D.S.—Charlotte
- "Treatment of Fractured Incisors" Roy L. Lindahl, D.D.S.—Chapel Hill
- "Indirect Inlays" Clarence L. Sockwell, D.D.S.—Chapel Hill

Surgery

- "Practical Technic for Vital Pulpotomy on Primary and Young
Permanent Teeth" Joseph F. Burket, D.D.S.—Chapel Hill
- "Surgical Procedures in General Practice"
Charles M. Westrick, D.D.S.—Chapel Hill
- "Root Resection" Norman F. Ross, D.D.S.—Durham
- "Re-implantation of Third Molars" Charles S. Cooke, D.D.S.—Wilson

Prosthetics

- "Newer Approach to Centric and Vertical Relation"
J. G. Crowell, D.D.S.—Hendersonville
Jimmie Taylor, Technician—Hendersonville
- "The Registration of Vertical and Centric Occlusion"
David Marmor, D.M.D.—Winston-Salem

Endodontia

"Modern Concepts in the Treatment of Root Canals"

John R. Pharr, D.D.S.—Charlotte

Periodontia

"Differential Diagnosis in Periodontal Lesions"

D. B. Mizell, D.D.S.—Charlotte

Miscellaneous

"Newer Concepts in Medicaments" L. Hampton Short, D.D.S.—Charlotte
William L. Saunders, D.D.S.—Greensboro

"Aids in Children's Dentistry" Freeman C. Slaughter, D.D.S.—Kannapolis

"Drugs in Oral Surgery" Charles D. Eatman, D.D.S.—Rocky Mount

"Problems of Veterans Administration Participating Dentists"

William P. Weeks, D.D.S.—Winston-Salem

"Variety Clinics" University of North Carolina Dental Students

Dental Hygienists

"The Healthy Tooth Train" Mrs. Martha Stimpson—Burgaw

"Ceramics for Good Behavior" Miss Kitty Hair—Charlotte

"Nutrition's Role in Cavity Control" Miss Barbara Dinwiddie—Asheville

"20 Questions—The Dental Way" Miss Karen Van Slyke—Winston-Salem

Dental Assistants

"Dream Puff" Miss Do—Miss Oon't Miss Lillian Callicutt—Charlotte

Miss Lillian Patterson—Gastonia

Miss Louise Richardson—Gastonia

SCIENTIFIC DISPLAYS

"Public Health" Ernest Branch

"University of North Carolina School of Dentistry"—

UNC School of Dentistry

"Orthodontia—50 Cases"

Amos S. Bumgardner

"Winning Posters"

Stuart A. Barksdale

"Dietetics"

N. C. Dietetic Association

"Mouth Diseases"

L. Franklin Bumgardner



MRS. LINEBERGER



MRS. HUNT



MRS. SMITH



MRS. SHERROD

North Carolina Dental Auxiliary

Mrs. H. O. Lineberger	President
Mrs. R. Fred Hunt	Vice-President
Mrs. T. Edgar Sikes	President-Elect
Mrs. Everett E. Smith	Secretary
Mrs. W. B. Sherrod	Treasurer
Mrs. Henry C. Carr	Historian

Third Annual Meeting Carolina Hotel, Pinehurst, N. C.

May 17-20, 1953

P R O G R A M

Sunday, May 17

2:00 P.M.	Registration	Foyer
3:00 P.M.	Dental Foundation Committee	Card Room
5:00 P.M.	Executive Board Meeting	Card Room
8:00 P.M.	General Session, North Carolina Dental Society	

Monday, May 18

8:30 A.M.	Registration	
10:00 A.M.	General Meeting	Card Room
	Invocation	Mrs. Darden Eure
	Reports:	
	Secretary's	
	Student Loan	Mrs. Ernest Branch
	Vocational Guidance	Mrs. W. W. Rankin
	Dental Foundation	Mrs. Grady Ross
	Treasurer's	

1:00 P.M. Luncheon

2:15 P.M. Business Session:

President's Report Mrs. H. O. Lineberger
Motto and Seal Mrs. John Brauer
Election of Officers

3:15 P.M. Guest Speakers:

Dr. Otto W. Brandhorst, President, American Dental
Association
Dr. W. W. Demeritt, UNC School of Dentistry

Tuesday, May 19

8:00 A.M. Golf Tournament Pinehurst Country Club

10:30 A.M. Croquet Tournament

1:00 P.M. Ladies' Luncheon—Awarding of Prizes

7:00 P.M. Banquet

9:00 A.M. Installation of Officers Card Room
Adjournment

FOR LADIES ONLY

You girls who like to be up with the "birdies," it's a golf tournament for you; and for an early start, ask at the desk for coffee and rolls in your room at 7:15 A.M., and be ready to tee off at the Country Club at eight sharp. The rest of us who are not quite so chipper at that hour can stroll out to the lawns at 10:30 for—hold your hats—a croquet tournament, no less! We'll show those golfing girls a thing or two! And for those whose day is not complete without a game of bridge, tables will be set up for your convenience at two-thirty.

DID YOU BRING YOUR SCRAP GOLD AND AMALGAM AND PUT IT IN THE BOX PLACED IN THE FOYER FOR THAT PURPOSE?

North Carolina State Dental Assistants Association

Third Annual Meeting
Holly Inn, Pinehurst, N. C.

May 17, 18, 19, 1953

Sunday, May 17, 1953

10:00 A.M.	Registration	West Lounge
	Board of Directors Meeting	Official Suite
3:00 P.M.	House of Delegates	Music Room
5:00 P.M.	Hostess Tea	Card Room
8:00 P.M.	General Session, North Carolina Dental Society— Carolina Hotel	
9:00 P.M.	Open House—Official Suite	

Monday, May 18, 1953

8:00 A.M.	Registration	West Lounge
9:00 A.M.	General Meeting	Music Room
	Call to Order	
	Invocation	Father Brown, Sacred Heart Church, Pinehurst, N. C.
	Address of Welcome	Dr. H. A. Karesh, Greensboro, N. C.
	Response	Lillian Callicutt
	President's Address	Alice Reece
	"Budget Plan Dentistry"— Dr. Burke W. Fox, Charlotte, N. C.	
	Introduction of Guests	
2:30 P.M.	"Aspects of Roentgenology of Importance to the Practicing Hygienist"	
	Dr. Harrison M. Berry, Jr., Philadelphia, Pa. Pine Room, Carolina Hotel	
4:00 P.M.	House of Delegates	Music Room
5:00 P.M.	Table Clinics	Card Room
9:30 P.M.	Banquet	Gray Fox Restaurant

Tuesday, May 19, 1953

8:00 A.M.	Registration	West Lounge
9:00 A.M.	House of Delegates	Music Room
9:30 A.M.	North Carolina Dental Society Clinics	Carolina Hotel
2:00 P.M.	House of Delegates	Music Room
	Installation of Officers	
	Adjournment	

The North Carolina Dental Hygienists' Association

Mrs. Nancy Horton, President	Henderson
Mrs. L. J. Leskosky, Vice-President	Charlotte
Miss Margaret Jones, Secretary	High Point
Mrs. Maxine Bowman, Treasurer	Greensboro

EXECUTIVE COUNCIL

Mrs. Nancy Horton	Miss Emma Mills
Miss Lucy Williams	

P R O G R A M

Sunday, May 17, 1953

- 1:00 P.M. Registration
- 8:00 P.M. General Session, North Carolina Dental Society

Monday, May 18, 1953

- 8:30 A.M. Registration
- 9:00 A.M. Opening Session
 - Call to Order
 - Minutes
 - Treasurer's Report
 - Business
 - President's Address Mrs. Nancy Horton
- 9:30 A.M. Greetings Dr. O. W. Brandhorst, St. Louis, Mo.
- 10:15 A.M. Dr. Amos Bumgardner Charlotte, N. C.
- 12:00 Noon "Dentistry in Thailand" Dr. J. F. Volker, Birmingham, Ala.
- 1:00 P.M. Luncheon
- 2:30 P.M. "Aspects of Roentgenology of Importance to the Practicing Dental Hygienist"—
 - Dr. Harrison M. Berry, Jr., Philadelphia, Pa.
- 3:45 P.M. Election and Installation of Officers
- 4:15 P.M. Executive Council Meeting

Tuesday, May 19, 1953

- 9:00-12:00 General Clinics
- 1:00 P.M. Luncheon
- 2:00 P.M. Dr. Shailer Peterson Chicago, Ill.
- 3:00 P.M. "Program for Training at the University of North Carolina" Dr. John C. Brauer, Chapel Hill
- 4:00 P.M. Close of Meeting
- 7:00 P.M. Banquet
- 9:00 P.M. Dance

Vulnerability To Socialistic Attack

A. C. CURRENT, D.D.S., President

A regional meeting of the President's Commission on the Health Needs of the Nation was held in Raleigh, North Carolina, on August 25, 1952. And it goes without saying that this was a meeting of health-interested people at the top level.

In the light of the title I have chosen for this discussion, I wish to emphasize a few things that came clearly to view as this meeting's program unfolded. High among these are the following:

1. The rural population, the tenant farmers, and the Negroes do not receive adequate medical, dental, and hospital care.
2. The basic responsibility for such health service rests with the individual.
3. To aid these people in their efforts to secure adequate health service is the responsibility of all citizens; or to put it another way, it is the responsibility of the State.

Now, in determining what constitutes adequate care there must be a standard-something by which we determine adequacy. And I am persuad-

ed that in this instance we determine adequacy for one group by comparing the services it receives with the services prevailing in the most fortunate group. The most fortunate here are the urban population with their financial ability to pay for the services of the most highly trained personnel and to provide the finest and best in hospitals. Whether or not the less fortunate should have at public expense a service comparable to the health service that urban centers provide for themselves is a debatable question.

But it all boils down to this point: The ideology that the State is supreme and that all individuals should fare alike under her dominance is abroad in the land. And those among us who feel that the individual is supreme and that the individual is, therefore, basically responsible for his own welfare must sustain our position by offering every possible assistance to the less privileged in their struggle to help themselves to better health service.

It is at this point that we are vulnerable to socialistic attack. It is at this point that those of us who believe in our American Way of Life must prove to all the world that we

are willing and ready to assist the less fortunate in their struggle to better their own environment in health service affairs.

If we fail to do this in the face of the admitted fact that the more fortunate should assist the less fortunate, we simply invite socialism to take over.

To teach the rural people, the tenant farmers, and the Negroes to take full advantage of existing facilities for improving their health and to assist them in their efforts to secure better health-service personnel and better facilities for health service are responsibilities that citizens subscribing to the Democratic—the American—Way of Life must face.

Since my vocational life is in the field of dentistry and since I am the dental member of the North Carolina State Board of Health, I feel that it is my responsibility to speak strongly and specifically on the dental health problem of these three groups.

May I ask you, then, whether the dental personnel employed by the urban centers can be depended upon to carry this service to our rural and Negro population?

We can only answer the questions that the future asks by reviewing the facts that the past holds. And the answer must be, "No."

We have admitted that in our Democratic Way of Life the people as a whole should assist the less privileged in their efforts to avail themselves of the best health service possible under existing conditions and that we should help them in their attempts to improve existing health service facilities. From a dental stand-

point the machinery, the know-how, to lick this problem is in bold relief before every citizen of North Carolina.

I am referring, as you must know, to the Division of Oral Hygiene of the North Carolina State Board of Health. This state institution under the leadership of Dr. Ernest Branch has long since achieved national recognition and fame. It has been studied and imitated by many organizations. Dr. Branch had at the peak of activity approximately forty qualified dentists carrying dental health-service information to the schools of North Carolina. Teaching children, as well as school authorities, to avail themselves of every known facility for improving their dental health was routine throughout the state. School authorities, parents, and all parties concerned were well pleased and singing the praises of the Division of Oral Hygiene of the State Board of Health.

But today these same people are clamoring for a continuation of that service. Requests and demands continue to pile up on the desk of the state's number one public health servant. And let no one be mistaken about the truthfulness of this statement. For indeed it has often been declared. No longer than a fortnight ago Dr. Applewhite, a man thirty-seven years in state public health service, declared before a regional public health meeting that Dr. Ernest Branch stands supreme as a public health benefactor.

The potential, I repeat, for applying this knowledge to the vulnerable

points in dental health needs throughout our state are clearly before us.

"Then why," you ask, "is this service not being now delivered?"

It is simply because the Division of Oral Hygiene is paralyzed. She is robbed of her field workers.

"And how did this happen?"

It has been happening all the time that the dollar has been growing more plentiful—cheaper. Recent graduates in dentistry can earn a net eight to ten thousand dollars anywhere in this state in their first year of practice. And men ably trained and qualified to help needy people with their dental health problems will not go to these remote areas of our state for less money than they can earn under their own direction and in places of their own choosing. People just aren't that philanthropic in nature. I am not, and you are not.

"But we can't pay salaries that will attract fully qualified dentists," someone breaks in to say. "It will upset our whole state economy; it will create unrest in other fields."

Well, just remember that the "socialized medicine" zealots are preaching their gospel to these needy people. And if you and I sit idly by, our Way of Life is gone anyhow.

"We cannot implement our Division of Oral Hygiene," you say.

Then my question is, "How do you propose, on a more economical basis, to meet the dental needs that all of us say must be met?"

I'll answer your question by saying that we CAN implement our Division of Oral Hygiene. And here's the way to do it. Officials designated to handle the salary part of this service should meet with the head of the Division of Oral Hygiene and determine the minimum in trained personnel necessary to carry dental health assistance to the areas of our state not otherwise covered. Material remuneration for this service should be made high enough to attract workers to it. And salaries should be continued on the upgrade until the agreed minimum in personnel has been employed.

As one who has given his vocational life in the field of dentistry and as the dental member of the State Board of Health, I insist that the Division of Oral Hygiene can be adequately staffed. And I insist further that money to staff the Division will be less than the money necessary to meet our dental health needs on any other plan.

If we allow our Division of Oral Hygiene to remain paralyzed for want of adequate staffing, we may lose far more than we realize.

We could lose our birthright!



From the Secretary's Desk

B. N. WALKER, D.D.S., Secy.-Treas.

The American Dental Association's campaign for the group plan of accident and health insurance was not successful so far as benefits are concerned for those members most in need of such protection. The plan spluttered to a dead-end as of December 31, 1952, after vigorous efforts put forth by the Council on Insurance to provide a worthy member-benefit. With approval of the Board of Trustees the council extended the enrollment period in the belief that the membership would fully support the proposal.

The effort by the Council on Insurance to provide an additional indemnifying member-benefit was commendable. In the first announcement the council made it clear that Certificates of Insurance would be forwarded to those applicants having favorable medical and insurance history. Applicants having unfavorable medical and insurance histories could not be approved until applicants from fifty per cent of the membership had been received.

As a last effort to provide this benefit, the insurance council obtained approval of the insuring company (National Casualty Company of Detroit through M. A. Gesner, Inc., 150 East Superior St., Chicago 11, Illinois) whereby any state society having an enrollment of fifty per cent of state society membership would automatically place said insurance in effect. As of December 31, North Carolina applications numbered

198, needing an additional 161 to meet the fifty per cent quota.

It is regrettable that a sufficient number of members did not avail themselves of the opportunity to qualify the plan during the charter enrollment, so that *all* members, irrespective of physical condition, might participate. In all, five mailings were sent to each member, commencing September 1. It is hoped that during the next enrollment period sufficient interest will result to attain the goal, so that all members might be included in the plan now in operation.

There has been considerable perplexity of late due to misunderstanding and misinterpretation by various individuals in regard to policies of the Selective Service System. At present, there has been no change in the policy regarding Priority III dentists over age 36. They are not subject to induction at this time. All Priority III dentists have been ordered for pre-induction physical examinations to determine for the armed forces the possible number who can be made available, if needed for future date. Many of those in Priority III who have had physicals and been rejected are being recalled for another examination, due to the lowering of physical standards required for acceptance.

All arrangements for the annual convention May 17-20, have been made. This should be one of the best as well as the largest conventions ever held by the North Carolina Dental Society, and we are looking forward to seeing you at the Carolina.

Districts Exhibit Enthusiastic Interest

NEAL SHEFFIELD, D.D.S., President-Elect

As supervisor of districts it has been my pleasure to visit each of the districts in the state and to get a first hand view of what the districts of the North Carolina Dental Society are accomplishing. In every district it was noted that the officers have been conscientious and progressive. The programs and clinics reflect much credit to the officers and committees and there was an excellent attendance at all five of the district meetings. These district societies have become institutions and with the fine programs that are given each year, you can see why very few members would allow themselves to miss one of the meetings.

Each fall our district societies get a transfusion in the new members which are brought into the society. At the last district meeting we saw the largest group of new men coming into the society than in any previous year that I can remember. This record of new members was due to the recruiting of a large part of the dental faculty of the University of North Carolina, Chapel Hill. I would like to remind this new faculty of the wonderful opportunities which they possess in shaping the future of dentistry. They will have a great influence upon the practicing dentist in the state. We are satisfied that our dental faculty will send into our com-

munities graduates who will be fired with enthusiasm for service to the profession and to the people in their communities. Let it never be said that our profession failed to meet these responsibilities. A service well done is the finest ammunition to combat socialized medicine and dentistry.

One item that I would especially like to call to the attention of all the district officers is the District Officers Breakfast, which is held each year at the state meeting. At this time dates of district meetings are set and any problems arising in the districts should be brought to this meeting for full discussion.

I would like at this time to extend to each new member in behalf of the North Carolina Dental Society a most cordial welcome. We want you to join ranks with us and never lose sight of the great opportunity that our profession is taking in equal place with the other health professions.

Committee appointments are being made and I am looking forward to working with your committee groups next year. It is hoped that a well rounded program will be secured and I know that each of you are more than anxious to make the 1954 meeting of the North Carolina Dental Society one of the banner meetings in the history of our state society.

Raleigh Dental Society Presents Portrait of Dr. Lineberger



On December 12, the Raleigh Dental Society met at the home of Mrs. H. O. Lineberger and presented to her and members of the family a portrait of the late Dr. Henry Otis Lineberger.

Shortly after the death of Dr. Lineberger in December of 1951, Dr. Robert Byrd, then president of the Raleigh Dental Society appointed Dr. S. B. Towler, Dr. J. Martin Fleming, and Dr. H. Royster Chamblee to serve as a committee to select an artist and work out the details of having a portrait painted to be presented to Mrs. Lineberger and family.

Dr. G. Fred Hale, who made the presentation, spoke of Dr. Lineberger's many fine qualities and said,

"I could indefinitely extol the virtues of Dr. Lineberger, but they are to a large degree too well known to delineate them all. You also know most of the honors which came to him in recognition of his services to social welfare, religious advancement, and professional progress. We, the members of the Raleigh Dental Society meet here this evening to pay some tribute and show our gratitude for the friendship and beneficence of one of our late members.

"Therefore, on behalf of the members of the Raleigh Dental Society, I present this portrait from our hearts in recognition and appreciation of him as a man, and in gratitude for his labors, leadership, and sacrifices."

Dedication of School of Dentistry

The dates of April 23 and April 24 have been set by the University for the formal dedication of the Schools of Dentistry, Medicine, Nursing, and the University Hospital.

A general assembly is scheduled, including all units of the Division of Health Affairs, in the stadium, Thursday morning, beginning at 10:30 A.M. There will be a nationally recognized speaker for this assembly. At noon, a barbecue luncheon will be available near the stadium.

Following the luncheon, from about 1:30 P.M. to 2:30 P.M., conducted tours will be given in all of the new schools and hospital. At 2:30 P.M. a ceremony will take place in the lobby of the new School of Dentistry, where the bronze plaque of Dr. Henry O. Lineberger will be presented by the dentists of the State to the University. Immediately after this ceremony, a scientific session will be held in one of the auditoriums, wherein dentistry will have a sepa-

rate meeting. A nationally prominent speaker from our profession is to appear on this program.

Following this scientific session, from about 4:00 P.M. to 5:30 P.M., conducted tours will again be scheduled.

Ladies are invited and encouraged to come to all of the dedication activities.

On Friday morning, April 24, the actual dedication ceremonies will take place, wherein the State's officials, University Administration, a nationally prominent speaker, and the deans of the several schools will participate. It is expected that some 5,000 to 6,000 people will be present for the various activities.

Please reserve the date of April 23 to be in Chapel Hill, and if possible Friday, April 24.

Some 9,000 invitations will be mailed by the University for this occasion, and each dentist will receive such an announcement soon.

First Postgraduate Course In Dentistry For Children

The University of North Carolina, School of Dentistry, is pleased to announce its first postgraduate course in *Dentistry For Children*, June 16 through June 19. The class will be limited to ten dentists, and priority for admission will be given in the order the applications are received.

The tuition will be \$75.00 for the course. The course will include lectures, laboratory, and clinical work with patients. The instructional staff will be: Drs. Burket, Demeritt, Lindahl, and Brauer.

Further details will be submitted through announcements in the mail.

News Items

- Drs. Pless and Frank Davis have returned from a few weeks stay in Florida.
- Dr. Jack Turbyfill has a new plough with a motor on it. What he is going to do with it, no one knows.
- Dr. Walter Davis has returned to private practice in Asheville, after two years in the Navy.
- Dr. R. F. Treiber moved to Weaverville, N. C. from Detroit, and has opened a bungalow office for the general practice of dentistry.
- Dr. W. K. Chapman was recently appointed head of the Dental Department at the Western North Carolina Sanitarium near Black Mountain.
- Dr. Dudley is in charge of the Buncombe County Dental Clinic in Asheville.
- Dr. F. W. McCracken of Sanford retired from the active practice of dentistry in January. At present he is in Tucson, Arizona getting a much needed rest and hoping to get some relief from an almost crippling arthritis. His practice has been purchased by Dr. James Hulin, formerly of Lexington, N. C.
- Dr. Marvin E. Chapin of Chapel Hill appeared as an essayist on the program of the Chicago Mid-Winter Meeting.
- Dr. Clifford E. Sturdevant of Chapel Hill was a clinician at the Greater Philadelphia Dental Society Meeting.
- Drs. Frank Alford, Franklin Bumgardner, J. B. Freedland, and John R. Pharr attended the Mid-Winter Clinic in Chicago. Dr. Alford attended the Congress on Examination and Licensure, and was elected president of the Council of the National Board of Dental Examiners. Dr. Bumgardner attended the meeting of the American Association of Dental Editors, of which he is secretary. Drs. Freedland and Pharr attended the annual meeting of the American Association of Endodontists.
- Dr. Edward U. Austin, of Charlotte, was ordered to active duty with the Navy and is stationed at Marine Barracks of Camp Lejeune, N. C.
- Dr. L. L. Banker has returned to Charlotte from two years active duty with the Air Force, having been stationed in San Angelo, Texas.
- Dr. Clarence F. Biddix has returned to Charlotte after two years active duty in the Navy to resume his association with Dr. P. C. Hull, Sr. Dr. Biddix was aboard the U.S.S. Navarro on an extensive cruise throughout the Mediterranean Sea, during which time he visited Paris, Rome, Genoa, Athens and the French Riviera.
- Mr. Girson P. Bryant, Thompson Dental Company, is back at work after a serious operation in November.

- Dr. Richard J. Eamick has been transferred by the VA from their office in Charlotte to their office in Winston-Salem. Dr. Roger F. Barr is now in charge of the Charlotte office.
- Dr. M. M. Forbes, Jr. has moved from Charlotte to Lenoir, North Carolina, where he is taking over the office of the late Dr. O. L. Moore.
- Dr. James A. Harrell of Elkin is on active duty with the Navy.
- Dr. Mons W. Hellyer of Winston-Salem has accepted a position on the faculty of Emory University School of Dentistry.
- Dr. P. C. Hull, Sr., of Charlotte has recovered nicely and is back in his office after a serious operation last fall.
- Dr. Elliot Motley plans to move into his new bungalow office around the first of March.
- Dr. Lackey Peeler has returned to Charlotte after two years active duty with the Marines.
- Dr. William H. Price is scheduled to be released in March from active duty with the Navy and plans to return to Monroe and resume practice.
- Dr. Edward C. Shiebel has taken over the office of the late Dr. Click in Elkin.
- Dr. D. T. Waller has recovered nicely and is back in his office after an operation in November.
- Dr. T. F. Weant, Jr., of Spencer has been called to active duty with the Navy and has been assigned to an Army unit for duty. (Yeah, that's correct.)
- Dr. John Williams of Winston-Salem, who is stationed with the Marine Corps in Pensacola, Florida was home for a short leave in January.
- Officers elected for the Dental Service of Charlotte Memorial Hospital are: Dr. Donald J. Kiser, Chief of Service; Dr. Henry Harrelson, Vice-Chief; and Dr. W. Stewart Peery, Secretary-Treasurer.
- Dr. Marvin Walker of Durham is building a new bungalow dental office.
- Dr. Jack Shankle and Miss Jane Woodall were united in marriage at Smithfield, December 21, 1952.
- Dr. Edward R. Burns and Miss Barbara Bean were married November 29, 1952 at St. Petersburg, Florida.
- These proud parents announce new arrivals in their families:
 - Dr. and Mrs. John B. Sowter, Chapel Hill, a daughter, Mary Elizabeth.
 - Dr. and Mrs. Norman F. Ross, Durham, a son, David Lee.
 - Dr. and Mrs. George Kirkland, Durham, a son, George F., III.
 - Dr. and Mrs. William T. Burns, Chapel Hill, a daughter, Janice Lynn.

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SEP 23 1953

DIVISION OF
HEALTH AFFAIRS

THE
JOURNAL
OF
The North Carolina
Dental Society

Component of the American Dental Association



CONTAINING THE
PROCEEDINGS
OF THE
NINETY-SEVENTH ANNIVERSARY MEETING
AT THE
CAROLINA HOTEL
Pinehurst, North Carolina
MAY 17, 18, 19, 20, 1953

Vol. 36

AUGUST, 1953

No. 4

Chapel Hill, North Carolina





DR. A. C. CURRENT, SR.
President of the North Carolina Dental Society
1952-1953



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OFFICERS 1952-53

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DR. NEAL SHEFFIELD, *President-Elect* Greensboro
DR. CHARLES I. MILLER, *Vice-President* Albemarle
DR. BERNARD N. WALKER, *Secretary-Treasurer* Charlotte

EXECUTIVE COMMITTEE

DR. J. HOMER GUION, *Chairman* (1953) Charlotte
DR. PAUL FITZGERALD (1954) Greenville
DR. I. R. SELF (1955) Lincolnton

EDITOR-PUBLISHER

DR. MARVIN R. EVANS Chapel Hill

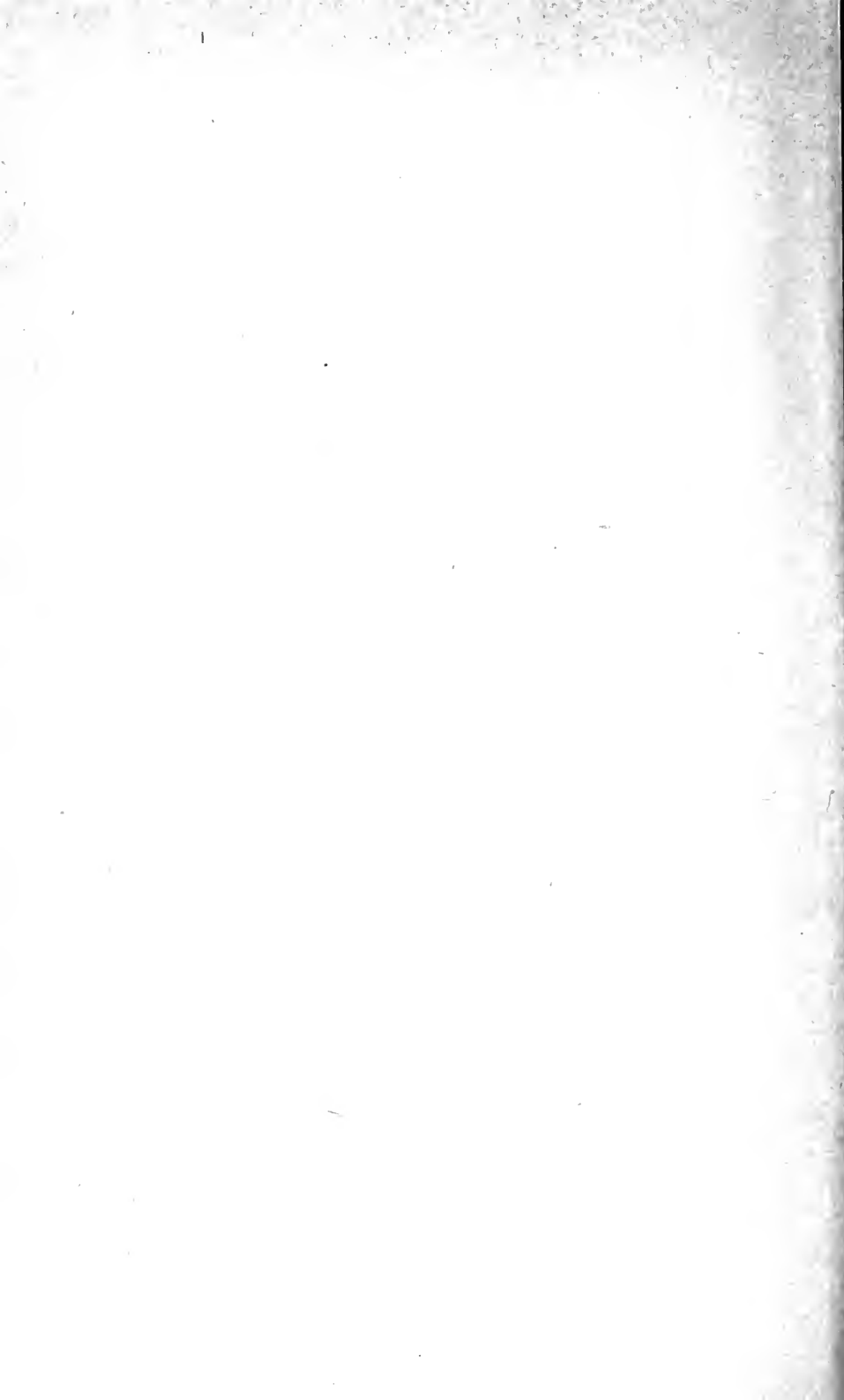


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HOUSE OF DELEGATES

First Session

Sunday, May 17, 1953

The first meeting of the House of Delegates was called to order at 9:30 p.m., President A. C. Current presiding.

PRESIDENT CURRENT: The House of Delegates will please come to order for the first session.

The Secretary will please call the roll:

(The roll call showed the following members present:)

A. C. Current, Sr., President
Neal Sheffield, President-Elect
C. I. Miller, Vice-President
Bernard N. Walker, Secretary-Treasurer

Executive Committee:

J. Homer Guion, Chairman
Paul Fitzgerald, Sr.
I. R. Self, Sr.

Ethics Committee:

Royster Chamblee, Chairman
Paul Fitzgerald, Jr.
A. W. Bottoms
Clyde Minges

State Board of Dental Examiners

E. M. Medlin
W. M. Matheson

First District

Hubert Plaster
Pearce Roberts, Jr.
Clinton Diercks
Walter McFall
W. M. Sloop

Second District

Thomas L. Blair
Harold W. Thompson
John Pharr
Donald Kiser
Fleming Stone

Third District

W. T. Burns
Maurice E. Newton
C. H. Teague
S. W. Shaffer
George Kirkland

Fourth District

L. M. Massey
S. B. Towler
Walter H. Finch, Jr.
E. D. Baker
Howard Branch

Fifth District

Z. L. Edwards, Sr.
Paul Jones
M. M. Lilley
R. Fred Hunt
Coyte Minges

SECRETARY WALKER: Mr. President, I declare we have a quorum.

PRESIDENT CURRENT: Gentlemen: I want to thank you in advance for the splendid work that I know you will do, as members of the House of Delegates, in the transaction of the business of the North Carolina Dental Society.

It is essential that we have a good attendance at all meetings of the House of Delegates. The Chair does not wish to hold this session of the House of Delegates longer than the majority of you would like to hold forth. If you wish, the Chair would be glad to entertain a motion that this first session of the House of Delegates adjourn not later than a certain time—unless you want to stay here all night.

Does anyone wish to make a motion that we adjourn not later than a certain time? I am speaking of this particular session. (No response voiced.)

No one desires to so move. Therefore, I presume you are willing to carry right on. The Chair is pleased, now, to announce the order of business for this House of Delegates. As you know, it is our duty to transact the business of the North Carolina Dental Society. The order of business is now the receiving and disposing of Standing Committee Reports and Special Committee Reports of the North Carolina Dental Society.

The Chair is pleased to recognize the Chairman of our Program Committee, Dr. Everett Moser.

DR. EVERETT MOSER: Mr. Chairman: On behalf of the Program Committee I want to say that we have spared neither time nor effort in bringing to you a program that will compare favorably with the programs we have enjoyed in the past. And, of course, we hope that you will benefit from these clinics.

If I am in order, and if it is within my province, not being a member of the House of Delegates, I move that this program be adopted as the official program of the Ninety-Seventh Anniversary Meeting of the North Carolina Dental Society.

PRESIDENT CURRENT: I believe, Dr. Moser, if you will allow me the correction, we will accept your recommendation of the Program Committee, as recommending the published program as the official program for this meeting.

The Chair will entertain such motion from a member of the House of Delegates.

(It was moved and adopted that the program as published be the official program.)

PRESIDENT CURRENT: It is so ordered that the program as printed be the order of business for our sessions of this convention.

The floor is open now for Committee Reports.

PUBLIC RELATIONS AND FLUORIDATION COMMITTEE

The Committee on Public Relations and Fluoridation, represented by five district chairmen and fifty local city chairmen, has been working effectively in many areas and ways within the state. In some of our cities, such as Durham, Burlington, Raleigh, and others, thousands of lines have been found in the press, including editorials, related to preventive dentistry and to the fluoride questions. The radio likewise has found dentistry a popular subject. In addition to the press and radio, there have been many meetings with civic clubs and lay organizations.

Some organizations have endorsed and featured the fluoridation program, such as the American Legion, and the Junior Chamber of Commerce. Another significant group, which discussed and featured the fluoride question, was the Student Council (high schools) of all western North Carolina at a meeting in Burlington, November 17, 1952.

The primary value of the Committee, from the general chairman's point of view, is one of having and making available the latest information regarding the facts and fallacies of fluoridation. This includes the presentation of such material to various professional and lay groups. Fluoridation kits prepared by the Council on Dental Health, of the American Dental Association, have been secured and distributed to district committee chairmen and to dentists in cities where the fluoride question was active.

Progress of Fluoridation in North Carolina. To date at least twenty-three North Carolina cities have immediate plans for fluoridation, or they already are placing fluorides in their communal water supply. Other cities are in varying stages of presenting the question to their city government or people.

Progress of Fluoridation Nationally. The latest figures compiled by the A.D.A. Council on Dental Health, April 1, 1953, indicate that an estimated 16,500,000 persons, or more than ten per cent of the nation's

population, are drinking fluoridated water routinely. There now are 703 communities where the fluoride ions are being added to the water supplies. In addition, some 3,570,000 persons living in 1152 communities are served by water supplies naturally containing fluoride ions.

General Statement. The Committee's activities resulted in an operational expense of about \$100 for mimeographing material, purchasing of kits from A. D. A., and postage. A statement, including items of expense, is appended.

The general chairman of this Committee desires at this time to express his appreciation for the splendid cooperation of the entire committee, and to the many dentists who were not members of the Committee. The total quantitative results of the Committee's efforts may not be realized in a one-or two-year period, but the values of the conferences, and the publicity regarding preventive dentistry surely will accrue in favor of the profession.

FLUORIDATION AND PUBLIC RELATIONS COMMITTEE

		Deposited in Account	\$126.85
<i>Date</i>	<i>List of Expenditures</i>		
August 20, 1952	Mimeographing charges		1.45
September 20	Addressograph Plates		32.50
November 17	Secretarial Services		8.00
November	Postage		36.83
February 25, 1953	American Dental Association		5.00
March 4	American Dental Association		5.10
May 2, 1953	Postage in reserve		37.97
Balance			0.00

J. C. BRAUER, *Chairman*

PRESIDENT CURRENT: The next is the Report of the State Board of Dental Examiners.

DR. F. O. ALFORD: Mr. President: I have a report from the State Board of Dental Examiners. It is the same report as given to the Governor. I should like to present it by title and have it published in the *PROCEEDINGS*, if I may.

I move that be done.

PRESIDENT CURRENT: It is moved and seconded that the Report of the State Board of Dental Examiners be accepted by title. Is there a question or any discussion?

(The motion was put to a vote and carried.)

NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

February 14, 1953

To His Excellency
William B. Umstead
Governor of North Carolina
Raleigh, North Carolina

Dear Sir:

In accordance with the provisions of the Dental Law I wish to hand you herewith a report of the proceedings of the North Carolina State Board of Dental Examiners for the calendar year 1952.

Three meetings of the Board have been held during the year.

A special meeting was held at the Carolina Hotel, Pinehurst, North Carolina, on May 13, 1952 for the purpose of considering the needed changes in the Dental Law to provide for the services of dental interns, dental externs and dental residences in the hospitals and state institutions in North Carolina and to consider any other business coming before the Board. All members of the Board were present. The members of the Legislative Committee of the North Carolina Dental Society attended this meeting to discuss the proposed changes in the Law. The Board of Dental Examiners appointed a committee composed of Drs. Jennette, Sanders and Alford to meet with the Legislative Committee of the Dental Society to advise on the proposed changes in the Law.

Due to the increased cost of examinations the Board recommended that the examination fee be raised from \$20.00 to \$30.00.

A committee from the Hospitals Board of Control appeared before the Board of Dental Examiners and urged that some provisions be made for supplying dental personnel in the state institutions. This subject was discussed at length and was referred to the Legislative Committee of the North Carolina Dental Society.

The Committee appointed to advise with the Legislative Committee met with them on May 14, 1952 and outlined the necessary changes in the Dental Law which would give the desired provisions.

The second meeting was the seventy-second regular annual meeting of the Board, which was held in Raleigh, North Carolina, beginning Monday, June 23, 1952 for the purpose of examination of applicants for licensure and to dispose of any other matters that might come before the Board. All members of the Board were present for this meeting. Dr. Darden J. Eure, newly elected member of the Board, was invited to attend this meeting to observe the examinations.

Ninety applications for the dental examination and thirteen applications for the dental hygiene examination were examined and found in

order. The applicants, having complied with the requirements of the North Carolina State Board of Dental Examiners and the Dental Law were permitted to take the examination given by the Board.

Five of the applicants failed to present for the examination. One applicant withdrew from the examination after the first day without completing it.

A letter from Dean John C. Brauer of the University of North Carolina School of Dentistry was received, in which was outlined the policies of the School of Dentistry in holding future examinations by the Board of Dental Examiners at the University. The Board of Dental Examiners voted to accept the agreement made with the University School of Dentistry to hold all future examinations at the School according to the correspondence with Dean Brauer on June 4, 1952.

Since all future examinations will be held in the University School of Dentistry the Board found no further use for the portable dental equipment it owned. It was voted to give this equipment to Dr. Sandy C. Marks, for use in his missionary school in the Belgian Congo. The Board of Dental Examiners obtained permission from the Division of Purchase and Contract, State of North Carolina, signed by Mr. P. H. Barnes, Jr., Surplus Property Engineer, to make this transfer of ownership to Dr. Marks. The equipment was not placed in storage but was turned over to Dr. Marks on completion of the examination, who crated it for shipment to his missionary school.

The old file belonging to the North Carolina Board of Dental Examiners, which was in the office of Dr. Wilbert Jackson, Clinton, North Carolina, who was a former secretary of the Board of Dental Examiners, was sent to the North Carolina Department of Archives and History, Raleigh, North Carolina, for storage and safe keeping. These files may be used by the Board of Dental Examiners at any time it may desire.

At an executive meeting held Tuesday night, June 24, 1952 Dr. A. T. Jennette was re-elected President and Dr. Frank O. Alford was re-elected Secretary-Treasurer of the Board for the ensuing year. Dr. E. M. Medlin and Dr. William M. Matheson were elected delegates to the North Carolina Dental Society. Dr. Cleon W. Sanders and Dr. Frank O. Alford were elected delegates to the American Association of Dental Examiners.

The third meeting was a special meeting held at the Carolina Hotel, Raleigh, North Carolina, Saturday and Sunday, July 19-20, 1952 for the purpose of tabulating the grades of the applicants for their licensure who were examined June 23 to 26, 1952 and to discuss other matters pertinent to the Board of Dental Examiners. All members were present.

A letter from the Institute of Government, Chapel Hill, North Carolina, was read. This letter called attention to a meeting to be held in the Institute of Government Building on July 26, 1952, to review the laws regulating State Licensing Boards. This meeting was in cooperation with the

Commission created by the 1951 General Assembly to study Practices and Procedures before State Administrative Agencies. Drs. A. T. Jennette and Frank O. Alford were appointed to attend this meeting to represent the Board of Dental Examiners.

A complaint from Mrs. T. Carter against Dr. Robert Hoffman of Asheville, North Carolina was heard. The Board was unable to find any violation of the Dental Law involved and both parties were so notified.

The results of the tabulation of the grades made on the examination given beginning June 23, 1952 revealed that the following applicants for dental licensure, having made an average grade of 80 or more, had passed successfully the examination, and therefore were entitled to receive license to practice dentistry in North Carolina.

<i>Name</i>	<i>Address</i>	<i>License No.</i>
Claibourne Worth Poindexter	Greensboro, N. C.	2130
Edward Charles Schiebel	Hanover, Pa.	2131
Llewellyn Hampton Short	Charlotte, N. C.	2132
Marvin Edwin Chapin	Chapel Hill, N. C.	2133
William Lee Saunders	Jamestown, N. C.	2134
Joseph Minter Payne	Clayton, N. C.	2135
Jacob A. Pearce	Dunn, N. C.	2136
Robert Monroe Withers	Davidson, N. C.	2137
William Walter Sessoms	Leland, N. C.	2138
Joseph Fremont Burket	Chapel Hill, N. C.	2139
William Thomas Pennell	Asheville, N. C.	2140
Rufus Gray Hoover	Charlotte, N. C.	2141
Alfred Cornelius Current, Jr.	Gastonia, N. C.	2142
James Eugene Hoppers	Chapel Hill, N. C.	2143
Ashby Gerald Inscoe	Castalia, N. C.	2144
Zeno Lester Edwards, Jr.	Washington, N. C.	2145
John Bright Sowter	Chapel Hill, N. C.	2146
Robert Donald Carlough	Clinton, N. C.	2147
Stuart Ashby Barksdale	Charlotte, N. C.	2148
Stanley Malvern Boyd	Richmond, Va.	2149
James Johnson Elliott	Lincolnton, N. C.	2150
Sidney Guy Hall	Richmond, Va.	2151
Grover Cleveland Hunter, Jr.	Atlanta, Ga.	2152
Benjamin Herriot Houston	Smithfield, N. C.	2153
Thomas Broughin Cameron, Jr.	Snow Hill, N. C.	2154
Thomas Arrington Kornegay	Smithfield, N. C.	2155
Wilbur Galloway McFarland	High Point, N. C.	2156
Ralph Jamison Brandon	Kannapolis, N. C.	2157
Glenn Franklin Bitler	Chapel Hill, N. C.	2158
Irby Carson Dawson	High Point, N. C.	2159
Monte George Miska	Chapel Hill, N. C.	2160
Cletus John Demary	Jacksonville, N. C.	2161
Rodeheaver Halsey Hicks	Staunton, Va.	2162

Morris Lucien Bell	Clinton, N. C.	2163
Virginia Bernadette Englett	Atlanta, Ga.	2164
George Straley Tate, Jr.	Norton, Va.	2165
Thomas Edgar Nelson, Jr.	Olivia, N. C.	2166
Floyd James Southard	Stokesdale, N. C.	2167
Clint William Bentley	Pores Knob, N. C.	2168
Emile Theodore Fisher	Wilmington, N. C.	2169
Robert Charles Geiger	Iowa City, Iowa	2170
Clarence Lee Sockwell	Gibsonville, N. C.	2171
Richard Smaford Hunter	Opelika, Ala.	2172
William Gordon Wright	Roanoke, Va.	2173
William Sutton Ketcham	Jacksonville, N. C.	2174
Thomas Dennis Vollmer	Burlington, N. C.	2175
Franklin Ewers Martin	Asheville, N. C.	2176
William Wayne Tucker	Chicod, N. C.	2177
Charles Wesley Thompson	Charlotte, N. C.	2178
John Thomas Bell	Dallas, Texas	2179
Thomas Adolphus Little	LaGrange, N. C.	2180
Roy Lawrence Lindahl	Chapel Hill, N. C.	2181
Robert Haney Benfield	Mooresville, N. C.	2182
Charles Baker Felts, Jr.	Chattanooga, Tenn.	2183
Robert Hodge Hollis	Wilmington, N. C.	2184
Marion Pike Nicholson, Jr.	Burlington, N. C.	2185
Joseph A. O'Leary, Jr.	Shelby, N. C.	2186
Chester Harold Bunz	Baton Rouge, La.	2187
David Grover Frye	Hickory, N. C.	2188
John Gerald Barry	New London, Conn.	2189
Edward Ray Burns	Aberdeen, N. C.	2190
David Henry Becker	Asheville, N. C.	2191
Worth Monroe Coward	Graham, N. C.	2192
Charles L. Milone	Effingham, Ill.	2193
Nicholas Geo. Georgiade	Durham, N. C.	2194
Thomas Hugh Byrd	Danville, Ind.	2195
David K. Hall	Asheville, N. C.	2196
Wilmore Brown Leonard	Goldsboro, N. C.	2197
Julian Harris Jones	Montgomery, Ala.	2198
Harry Lee Hinson	Charlotte, N. C.	2199
Perry Phiimon Little	Monroe, N. C.	2200
James Claude Gantt	Kings Mountain, N. C.	2201
Charles Martin Westrick	Chapel Hill, N. C.	2202
Milton David Daniels	Camp Lejeune, N. C.	2203

The following applicants for dental hygiene license, having made an average of 80 or more, were issued license to practice dental hygiene in North Carolina:

Barbara Ann Byerly	Washington, D. C.	34
Marinell Little	Statesville, N. C.	35
Claudia Gail Hopkins	Jacksonville, N. C.	36

Barbara Sue Lewis	Gastonia, N. C.	37
Barbara Elizabeth Dinwiddie	Black Mountain, N. C.	38
Margaret Ann Chesnut	Charlotte, N. C.	39
Mary Wilmet Johnson	Plymouth, N. C.	40
Ruth Mae McDonald	Charlotte, N. C.	41
Eleanor Ruth Padgett	Black Mountain, N. C.	42
Karen Jean Van Slyke	Wilson, N. C.	43
Kathleen Carol Hare	Shimston, West Va.	44
Juanita Jamison	Charlotte, N. C.	45
Bevelyn Brod Pearlman	Midway Park, N. C.	46

The following applicants for dental licensure, having made an average of 80 or less, were declared to have failed the examination:

Morton Harvey Robarge	Kent, Conn.
Mack C. West	Goldsboro, N. C.
Stanley H. Miller	New York N. Y.
Norman Renwick Stoddard	Fort Bragg, N. C.
Jules Harvey Schwartz	New York, N. Y.
Charles Herbert Parker	McKeesport, Pa.
Arthur Eugene Frazier, Jr.	Charlotte, N. C.
Jeffrey Monroe Brogdon	Hopewell, Va.
Laverne Marion Cowan	Covington, Va.

The Board has investigated several reported violations of the Dental Law during the year and has now secured evidence sufficient for two indictments.

At a meeting of the North Carolina Society held in Pinehurst, North Carolina, May 11, 1952, Dr. Darden J. Eure of Morehead City was elected to succeed Dr. Wilbert Jackson of Clinton and Dr. Frank O. Alford of Charlotte was elected to succeed himself as members of the Board of Dental Examiners.

I am enclosing herewith a financial statement as of January 1, 1952 to December 31, 1952, which was compiled by a Certified Public Accountant.

Respectfully submitted,

FRANK O. ALFORD, *Secretary-Treasurer*

OFFICERS

PRESIDENT

Dr. A. T. Jennette Washington, N. C.

SECRETARY-TREASURER

Dr. Frank O. Alford Charlotte, N. C.

MEMBERS

Dr. Wilbert Jackson Clinton, N. C.

Dr. E. M. Medlin Aberdeen, N. C.

Dr. W. M. Matheson Boone, N. C.

Dr. Cleon W. Sanders Benson, N. C.

February 4, 1953

Dr. A. T. Jennette, President,
North Carolina State Board of Dental Examiners,
Washington, N. C.

Dear Sir:

We have examined the Balance Sheet of the North Carolina State Board of Dental Examiners as of December 31, 1952 and the related statement of cash receipts and disbursements for the year ended that date, and have examined and tested accounting records and other supporting evidence, by methods and to the extent we deemed appropriate. Our examination was made in accordance with generally accepted auditing standards applicable in the circumstances and included all procedures which we considered necessary.

In our opinion, the accompanying Balance Sheet of North Carolina State Board of Dental Examiners and the related statement of cash receipts and disbursements, present fairly the financial position at December 31, 1952, and the result of its financial operations for the year, in conformity with generally accepted accounting principles applied on a consistent basis.

The following is an index of the Exhibits and Schedules contained herein:

EXHIBIT A BALANCE SHEET AS AT DECEMBER 31, 1952

EXHIBIT B CASH RECEIPTS AND DISBURSEMENTS FOR THE
YEAR ENDED DECEMBER 31, 1952

Schedule A-1 Reconciliation of Cash—December 31, 1952

Schedule B-1 Examination and Clinic Expenses for the Year Ended
December 31, 1952

Schedule B-2 Per Diem and Travel Expenses for Year Ended December
31, 1952

Respectfully submitted,
GEORGE E. DOMBHART, C.P.A.

Exhibit A

NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

DR. FRANK O. ALFORD, *Secretary-Treasurer*

BALANCE SHEET

December 31, 1952

ASSETS

Cash

On Hand:

In Office\$ 84.00

In Bank:

Union National Bank, Charlotte, N. C. 1,611.93 \$1,695.93

TOTAL ASSETS\$1,695.93

LIABILITIES AND SURPLUS

TOTAL LIABILITIES	\$ —0—
SURPLUS	1,695.93
TOTAL LIABILITIES AND SURPLUS	\$1,695.93

Exhibit B

CASH RECEIPTS AND DISBURSEMENTS

Year Ended December 31, 1952

CASH BALANCE AT JANUARY 1, 1952	\$1,267.85
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Cash Receipts During Year

1952 Dental Licenses Issued	51	\$ 102.00	
1952 Hygienist Licenses Issued	1	2.00	
1953 Dental Licenses Issued	1103	2,206.00	
1953 Hygienist Licenses Issued	35	70.00	
Examination Fees	103	2,060.00	
Sale of Mailing Lists		10.00	
Reinstatement Fees		48.00	
Penalties for Late Application		6.00	
Certificate of Registration		2.00	4,506.00
TOTAL CASH AVAILABLE			\$5,773.85

Cash Disbursements During Year

Salaries:

Dr. Frank O. Alford, Secretary-Treasurer	\$300.00		
Mrs. Virginia Rochelle, Assistant Secretary	300.00	600.00	
Per Diem and Travel Expense— State Board (Schedule B-2)		1,506.60	
Examination and Clinic Expenses (Schedule B-1)		1,290.83	
Postage		130.00	
Stationery, Printing and Office Expense		332.80	
Auditing		50.00	
Telephone and Telegraph		112.69	
Dues—American Association of Dental Examiners		55.00	4,077.92

CASH BALANCE AT DECEMBER 31, 1952:

Bank Balance	\$1,611.93	
Cash on Hand	84.00	\$1,695.93

Schedule A-1

RECONCILIATION OF CASH

December 31, 1952

Cash on Hand

In Office \$ 84.00

Cash in Bank

Union National Bank, Charlotte, N. C.:

Balance as per Bank Statement \$2,032.19

Less—Outstanding Checks:

	<i>Number</i>	<i>Amount</i>		
	335	\$ 186.26		
	336	234.00	420.26	1,611.93

TOTAL CASH AS SHOWN BY

EXHIBIT A \$1,695.93

Schedule B-1

EXAMINATION AND CLINIC EXPENSES

Year Ended December 31, 1952

Room for Examination (Carolina Hotel Ball Room)	\$ 300.00
Rooms, Meals and Incidentals for Board Members	378.35
Nurse and Secretary	60.00
Laundry Service	55.01
Janitorial Service	49.00
Electric Wiring for Equipment in Clinic	10.00
Storage and Moving of Equipment to Clinic	24.67
Advertising for Free Clinic and Notices of Meeting	16.98
Dental Supplies	62.21
Printing	48.21
Models for Clinic	126.63
Room and Meals—Grading Applicants	159.77

TOTAL AS SHOWN BY EXHIBIT B \$1,290.83

Schedule B-2

PER DIEM AND TRAVEL EXPENSE

Year Ended December 31, 1952

Dr. Frank O. Alford:

Per Diem	\$220.00	
Travel	45.80	
Meals	6.00	
Printing Questions for Examination	7.00	\$ 278.80

Dr. W. M. Matheson:

Per Diem	\$210.00
Travel	40.80

Meals	4.00	
Printing Questions for Examination	7.00	261.80
<hr/>		
Dr. Cleon W. Sanders:		
Per Diem	\$210.00	
Travel	7.60	
Meals	4.00	
Printing Questions for Examination	7.00	228.60
<hr/>		
Dr. E. M. Medlin:		
Per Diem	\$210.00	
Travel	15.00	
Meals	4.00	
Printing Questions for Examination	7.00	236.00
<hr/>		
Dr. A. T. Jennette:		
Per Diem	\$220.00	
Travel	34.40	
Meals	6.00	
Printing Questions for Examination	7.00	267.40
<hr/>		
Dr. Wilbert Jackson:		
Per Diem	\$210.00	
Travel	13.00	
Meals	4.00	
Printing Questions for Examination	7.00	234.00
<hr/>		
TOTAL PER DIEM AND TRAVEL EXPENSE AS		
SHOWN BY EXHIBIT B		\$1,506.60

PRESIDENT CURRENT: The next report is that of the Publications Committee.

DR. MARVIN EVANS: Not being a member of the House of Delegates, I am not permitted to make a motion. I should like to suggest and recommend that the entire financial set-up, including the detailed report of our expenditures and receipts for the year, be read into the *PROCEEDINGS* by title.

DR. PAUL FITZGERALD, SR.: I will so move.

PRESIDENT CURRENT: It has been moved and seconded that this report be accepted by title and printed in the *PROCEEDINGS*. Is there any question or discussion?

(The motion was put to a vote and carried.)

REPORT OF THE EDITOR-PUBLISHER
JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY
1952-53

The annual report of the Editor-Publisher is herewith submitted setting forth activities for the year 1952-53, and the consolidated financial position June 15, 1953.

The balance sheet and the accompanying statements of income and expenditures for the year is included.

The Journal as printed is a record of our accomplishments. In addition to the duties related to the publication, the hand programs for our state meeting were compiled and paid for by the Editor-Publisher.

The total receipts for the year were \$2,869.44. The total expenditures were \$2,319.70, making a net profit for the year of \$549.74.

I wish to express my sincere appreciation for the splendid help and co-operation of the Publications Committee; the help of Dr. C. C. Poindexter, Chairman of the Prosthetic Dental Service Committee; the able guidance of our Executive Committee; the loyalty and interest of the officers of our society, as well as the enthusiastic support of the entire membership; last, but not least, I wish to express my sincere appreciation for the help given to me by my wife. Her help in securing ads, proof-reading, typing manuscripts, making stencils, addressing envelopes and arranging material for publication without cost to the society is reflected in the present financial status.

M. R. Evans,
Editor-Publisher

FINANCIAL STATEMENT
YEAR 1952-53

Balance on Hand May 12, 1952	\$1,041.97
Receipts	
Subscriptions	15.00
Advertising Fees	2,854.44
	<hr/>
Total	2,869.44
	<hr/>
	\$3,911.41
Expenditures	
University Service Plants (long distance telephone)	67.78
Orange Printshop	
September issue	504.00
January issue	506.00
April issue	591.75
Hand programs	145.00
Hemmer's Photo Shop	20.84
Ledbetter-Pickard (office supplies)	16.90
Postage and \$50.00 deposit on 2nd class mail	73.79
American Assn. Dental Editors	10.00
Foister's Camera Store (camera, photo supplies)	345.64

Bureau Visual Education	3.75
Mrs. Thomas H. Darden (typing)	10.00
Miss Harriet Horney (typing)	6.50
Western Union	4.75
McCray-Chapman (sorting-hauling)	13.00

Total	\$2,319.70
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Balance on Hand June 15, 1953—Bank of Chapel Hill	\$1,591.71
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PRESIDENT CURRENT: We now have the Report of the Legislative Committee.

REPORT OF THE LEGISLATIVE COMMITTEE

At our last annual convention the State Board of Examiners presented to the Legislative Committee certain proposed amendments to the North Carolina Dental Practice Act with the request that we study them and present the proposals to the House of Delegates for its consideration. The convention being so near adjournment the committee felt that it did not have sufficient time in which to give proper study to the subject in order to be able to make intelligent and conclusive recommendations before adjournment of the convention. Therefore, by direction of the committee, the chairman went before the House of Delegates, at its last session of the 1952 convention, and explained the situation with the request that after the committee, together with the Executive Committee, had thoroughly studied the proposals and was prepared to make definite recommendations, it be authorized to present such recommendations to the District Societies at their fall meetings, and if the District Societies approved the recommended amendments, if any, the committee then be authorized to have a bill prepared for introduction in the 1953 General Assembly. This request was granted.

This procedure was recommended because the facts furnished our committee by the Board of Examiners convinced us of the need and the urgency of some amendments to our dental law with as little delay as possible. In view of the fact that the Attorney General's office had already informed the Board of Examiners that it was permitting some violations of the law, due not to their own choosing, and since the next session of the Legislature would be a matter of history before the convening of our 1953 convention, our committee felt that the matter was of too great importance to delay action until the 1955 session of the General Assembly. In justice to the Board of Examiners, we desire to recite just one instance wherein the Board found itself in a most embarrassing position. A dentist, who was not licensed and registered in North Carolina, was employed at one of our State Hospitals, without the knowledge or consent of the Board of Examiners, and in violation of the law. This situation prevailed several months before the Board became aware of his employment. The services of this man were badly needed, and at the time there was no North Carolina licensed dentist available. Had the Board of Examiners acted promptly and strictly in accordance with the statute such action would have created a most embarrassing situation for another agency of government to say nothing of the bad psychological effect. Therefore, our committee agreed with the judgement of the Board that in the case of such employment the employee should be screened by the Board of Examiners and be required to take the first examination given by the Board after his employment, and then if he fails to qualify for license his service should automatically cease. Under the amendments which have just become law it will be easier for the Board of Examiners to handle such cases.

Up until this point, for the purpose of information and clarification, we have given this brief background in the hope that you will better understand and appreciate the importance of and the necessity for some amendments to our dental law. We regret that we were not able to complete our work in time to present the proposals to the District Societies at their fall meetings, as had been contemplated. It was only after many, many meetings and months of study that our committee was prepared to submit its recommendations to the President of the Society which was on February 4, 1953. Dr. Current immediately called a special meeting of the House of Delegates to convene at Pinehurst on Sunday, February 11, 1953, for the purpose of considering our report, a copy of which had been placed in the hands of each member of the House of Delegates prior to the meeting. A few hours before the convening of this special session of the House of Delegates our committee received a communication from Mr. Francis J. Garvey, Secretary, Council of Legislation, ADA, suggesting the advisability and the desirability of changes in phraseology in some sections of the proposed bill, and said that it could be done without changing the intent of the bill. Therefore, we presented our report in the form of a proposed bill to amend our dental laws, with the suggestion that in case the House of Delegates saw fit to adopt the report it do so with the understanding that the Legislative Committee, together with the Executive Committee, be authorized to make such changes in the language of the proposed bill as the committee deemed advisable, but in no case change the intent of the law. The report was adopted.

Following the adoption of this report, and in compliance with your instructions, our committee, without delay, contacted the Secretary of the Council on Legislation, ADA, and sent him a copy of our report to the special meeting of the House of Delegates and the committee's entire file with the request that he study same thoroughly and then give us the benefit of his suggestions with respect to any change of phraseology he deemed advisable. This he did in a most commendable manner. His thorough analysis of our Dental Practice Act, together with his logical suggestions relating to phraseology and proper arrangement of the sections were such as to receive high commendation from the Attorney General's office.

Having assembled the necessary data, and having received authorization from the House of Delegates, the next important job for the committee was to have the report put in proper legislative form. Realizing that it is the function of the Attorney General's office to render legal counsel and to draft bills only for agencies of government and members of the legislature your chairman then requested the President and the Secretary of the Board of Examiners, and Senator Paul E. Jones, of the North Carolina State Senate, to arrange a conference with Mr. Edward B. Hipp, of the Attorney General's office, for the purpose of requesting him to draft a bill for introduction in the General Assembly. Your chairman, not legally representing an agency of government, attended, supposedly only as an interested member of the profession. Our report, which had been adopted by the House of Delegates at the special meeting at Pinehurst in February, together with Mr. Garvey's complete analysis of our statutes, and his timely and logical suggestions with reference to phraseology and the arrangement of sections, were left with Mr. Hipp with the request that he study same carefully and then draft a bill for introduction in the General Assembly. In due course of time he completed his draft and sent the proposed bill to Senator Paul E. Jones, at the State Capitol, who introduced it in the Senate with the signature of every member of that honorable body. After it passed its third reading in the Senate it was sent over to the house of Representatives where it passed without opposition and became law upon ratification during the last days of March, 1953.

Z. L. EDWARDS, *Chairman*

DR. EDWARDS: Mr. President, I move the adoption of the report.

DR. CLYDE MINGES: I will second that motion.

PRESIDENT CURRENT: Thank you, Dr. Edwards.

The Chair would take several minutes to comment here, were it not for the fact that he will have that privilege tomorrow. Is there any discussion on this?

DR. BURKE FOX: May I be permitted the privilege of the floor?

PRESIDENT CURRENT: Are you speaking to the question?

DR. FOX: Yes, I am.

PRESIDENT CURRENT: You may.

DR. FOX: Mr. President: The committee exceeded the authority that was given it in two respects:

Their permission at the meeting held here in February, was that they should change the phraseology without changing the intent of the law. The bill which was presented to the Legislature, and finally passed, made two radical changes in that. In the first place, they extended to the Division of Oral Hygiene the right to employ dentists who had not received licenses, had not stood for examination. This was not included in the bill that was presented here at Pinehurst.

In the second place, they set up the principle of extending temporary licenses in the State of North Carolina. In our sister state of South Carolina, the privilege of giving temporary licenses was extended some years ago. A temporary license was given to one man in the state of South Carolina, and he refused to take the examination from the State Board of Dental Examiners. The court ruled that the temporary license could not be revoked. So far as I know, he never did take his examination, and never did get his temporary license revoked, on the basis of his capabilities as a dentist.

I am afraid we have set up a definite precedent. I just thought it should be in the record that the committee exceeded the authority that was given it at the February meeting.

PRESIDENT CURRENT: Is there any further discussion on the report before the House? This is the report made by the Legislative Committee.

(The motion was put to a vote and carried.)

PRESIDENT CURRENT: Dr. Edwards has another report.

DR. EDWARDS: Mr. President: I just want to refer to what has been said with reference to the committee exceeding its authority.

If there ever was a committee which was meticulous in its desire and in its actions not to do that, this one was. I happened to be reading, the other day, of a man who was compared to a blotter. This man always soaked in everything, but he did it backwards.

I am sure the gentleman from Charlotte must not have read our report, which was in the form of a bill, and which was made before a special meeting of the House of Delegates at Pinehurst. If he can find the words, "temporary license," in the bill which was introduced and passed, I will kiss him at the front door.

In the first place, what he refers to as the committee's extending the right to the Division of Oral Hygiene, Dr. Branch's department, was already in the bill as it was presented at Pinehurst. I am wondering if you really read that report, Dr. Fox. I have a copy of it up in my room, and for the benefit of your own enlightenment I would be glad to show it to you. Then you might be willing to come back before this committee and this House of Delegates and apologize to the convention for putting what you said on the record. If so, I would certainly suggest that what I have said not be on the record. It was in reply to what you have said.

Since as Chairman of the Legislative Committee I got away with no more opposition than this, I am going to give you something to think about now, in this report. I hope you will not be like the man who was compared to the blotter, in this case. I hope you get it straight from the shoulder.

REPORT OF THE ADVISORY COMMITTEE TO THE SCHOOL HEALTH COORDINATING SERVICE

In preparing this report the committee had in mind the fact that all members of the North Carolina Dental Society may not know the functions of this committee nor the necessity for its creation by the President only a few months ago. At the time of our appointment Dr. Current charged us with the responsibility and directed that we examine and study the phases of the School Health Program that is currently being conducted by the School Health Coordinating Service, especially with respect to policies relating to procedure, type and scope of services rendered, method and basis of remuneration for such services, plan for determining the eligibility of the recipients, and then report our findings to the House of Delegates during this Convention. We regret that the limited time in which the committee has had to work has not afforded ample opportunity to make a thorough and comprehensive study of the program. Therefore, in order that you may better understand and appreciate the difficulties involved in the problem under consideration we deem it necessary and advisable to give you a brief history of events leading up to the present status of the situation.

On July 1, 1949, School Health funds in the amount of \$550,000 per year became available in the budget of the State Department of Public Instruction to be administered by the School Health Coordinating Service. This appropriation was made in response to a request to the State Legislature that such funds be granted in order for the state to be eligible to receive Federal matching funds under the provisions of a bill then pending in the Congress which would appropriate money to the states to carry on a program of correcting physical defects among school children whose parents, or guardians, were not financially able to provide such services. So far as we have been able to ascertain no Federal funds for this purpose have been appropriated by the Federal Government. However, The North Carolina General Assembly has at each session since then renewed the appropriation.

During the first school year, 1949-1950, only a small amount of these funds was budgeted for the correction of dental defects. The reason being

that, through the services of the Division of Oral Hygiene of the State Board of Health, dental defects were being taken care of to greater extent than were any of the other physical defects. Later, with the increased demand for a greater appreciation of dental services, and with the decreased staff of the Division of Oral Hygiene, some funds were spent with local dentists. Since that time those whose prerogative it is to formulate policies and to allocate funds for services saw fit to adopt a policy of greater emphasis on and the necessity of dental corrections. In view of this somewhat accelerated program, and because of the increased demand upon the dentists' time, it became definitely and unmistakably clear that if the program was to accomplish its laudable and humanitarian mission of service, many things were important, but two were essential and absolutely necessary.

1. Cooperation of the dentists.
2. The adoption of an over-all state-wide plan that was agreeable and acceptable by the dentists and the School Health Coordinating Service.

This committee notes with satisfaction that the Dental member of the State Board of Health, Dr. A. C. Current, brought this matter to the attention of the Executive Committee of the North Carolina Dental Society as early as September 17, 1950, and recommended that the dentists participate in the program. The Executive Committee adopted this recommendation, and at the same time recommended some principles and procedures to be applied to the corrective dental service rendered by local dentists and paid for from School Health funds. During the school years of 1950-1951 and 1951-1952, Dr. E. A. Branch, Director of the Division of Oral Hygiene, met with groups of dentists in every section of the state in an effort to familiarize them with the program and, at the same time, called attention to the advisability and the necessity for the adoption of an over-all working plan that would be mutually agreeable and acceptable by both the dentists and the School Health Coordinating Service. The record shows that in February 1952 an overall plan was proposed and agreed upon by the Executive Committee of the North Carolina Dental Society, the State Board of Health, and the School Health Coordinating Service. This agreement was signed by Mr. Chas. E. Spencer, School Health Coordinating Service; Dr. C. C. Applewhite, Division of Local Health; and Dr. E. A. Branch, Division of Oral Hygiene. This signed agreement was sent to local Health Officers, Superintendents of Schools, and Dental members of County Boards of Health.

This committee regrets to report that in spite of this agreement no uniform plan has been, nor is now, being observed, which might be considered by some as a violation of contractual obligations, entered into in good faith with the other interested parties. We find that some groups are working on an hourly basis, in accordance with the agreement, while others insist on a fee basis, and some seem reluctant even to accept suggestions. At the present time there are almost as many plans as there are counties. In some counties the dentists are working by the piece and are rendering all types of service from simple fillings to prosthetic restorations. In some instances a few children are receiving extensive and expensive corrections. In others there seem to be no inclination or effort to limit the services to the underprivileged. This unfortunate situation has resulted in much confusion, as well as discontent and complaints on the part of Health Officers, School Superintendents, and Dentists.

It is the opinion of this committee that the cause of the present confusion and noncompliance with the existing agreement is not due to the lack of a good plan, but primarily to the failure of those in authority to enforce it. Experience teaches us that no plan, whether it be on a fee basis

or an hourly basis, will operate successfully without definite rules of enforcement, and an inclination on the part of each party to the agreement to live up to its obligations.

In view of the aforementioned facts and observations we recommend for your consideration:

1. The adoption of an over-all state wide working plan that is enforceable, agreeable and acceptable to both the dentists and the School Health Coordinating Service. Such a plan should include policies relating to procedure, type and scope of services to be rendered, method and basis of remuneration for services, and the eligibility of the recipients of the services. In this connection we consider the plan that was approved by the Executive Committee, and agreed to and signed by representatives of the State Board of Health and the School Health Coordinating Service as a very good plan. However, in the light of past experience, we suggest some revision of the original plan, together with possibly one additional paragraph to read as follows: "Services for underprivileged school children shall be limited to those enrolled in the grades up to the seventh inclusive. We believe that if services are limited to children in these grades, it will afford an opportunity to render service where it is needed most, and that such limitations of service will largely eliminate the necessity for such expensive work as gold, jacket crowns, and extensive prosthetic restorations, about which there is so much criticism at the present time."
2. That when such a plan is agreed upon and adopted all dentists be invited to participate, and that all participants be required to comply with the stipulations of the agreement without deviation.
3. We suggest the advisability of considering the limitation of the amount of services one individual may render. We feel that it would be a bad policy for us to indicate by our action that the dentists of North Carolina are trying to make a profit on poverty.
4. That the incoming administration continue an advisory committee for the purpose of further study and research on the subject, and that this committee establish a closer liaison with a similar committee of the North Carolina Medical Society, for the purpose of exchanging views and coordinating efforts.

Now, in concluding this report, the committee desires to make a few comments which, in nature, may sound rather provocative. We do so not to suggest that we know the solution of the problem, but in the hope that it will help to create a stimulus for sound thinking concerning the future as well as the present. We view with deep concern this venture of the state in the field of medical and dental corrections. This School Health program is a distinct departure from the philosophy of Public Health work we have known heretofore. This program is not one of education and prevention but a program of corrections supported by tax dollars. This committee finds it difficult to reconcile its thinking with the logic of the State Legislature in appropriating over one half million dollars of the taxpayers money a year for the correction of physical defects, and then making the funds available in the budget of a department other than that of the State Board of Health. We feel that this program should be under the direction of some Division of the State Board of Health, and under the personal supervision of a man who has been trained in the science and practice of medicine, and thoroughly familiar with and devoted to the ethics and high ideals of private practice. We are under the impression that the trend of the times is to turn over the responsibility of teaching Public Health to so-called

Health Educators, Health Supervisors, and others whose qualifications are limited to a college major in physical education or with a short course in public health work. If this trend continues the result will be that those who render the real service to humanity, the dentists and the physicians, will soon be relegated to the roll of laborers in the vineyard of corrections, with little voice or authority in the making of policies we shall be required to work under. Our final warning to you is—Wake up!

Z. L. Edwards, *Chairman*

DR. EDWARDS: I move its adoption.

PRESIDENT CURRENT: Dr. Edwards has moved the adoption of this splendid report.

(The motion was seconded, put to a vote and carried.)

PRESIDENT CURRENT: We come now to the Report of the Dental Caries Committee.

DR. J. DONALD KISER: Mr. President, Members: The Committee Chairman wrote to each member of the Dental Caries Committee asking for suggestions to be submitted in this report. One reply was received which contained suggestions, and those suggestions we attempted to include in this report. Otherwise, these are personal observations of the chairman. I think that word of explanation is probably necessary.

REPORT OF THE DENTAL CARIES COMMITTEE

The Dental Caries Committee has not been faced with any particular problem during the past year. We have observed a great deal of interest in caries prevention by the general public as well as the dental profession in North Carolina.

Certain dentifrice and gum manufacturers have had extensive advertising programs proclaiming the caries preventive powers of their products. Many of these claims we feel are much exaggerated and the statistics distorted and misleading. However, the public interest created in caries prevention has been good. The public has been made more aware of the importance of thorough mouth hygiene at home as well as regular visits to the dentist.

It is the opinion of the committee that we as a profession should constantly advise our patients of the dangers of high carbohydrate diets with particular emphasis on elimination of in-between meal sweets. We should continue to emphasize to our caries susceptible patients the importance of such proven remedies as reduced sugar consumption, mouth cleansing immediately after meals, and preventive odontotomy.

Fluoridation of communal water supplies is still increasing rapidly throughout the nation. The latest reports indicate that more than thirteen and one half million persons are now consuming fluoridated water. There are 720 communities now participating in fluoridation projects.

Since there is no uniform standard used in evaluating the results of these various studies and projects it is rather difficult for the average dentist to evaluate their success. It would seem, therefore, that a national standard of procedure in caries studies is needed. Such standards to include (1) methods of examination, (2) length of time for study, (3) use of control groups, (4) analysis of data, (5) and presentation of information, etc.,

If the A. D. A. would outline such a plan to be followed in testing the effectiveness of various products it would give us some basis on which to give credit where it is due.

J. Donald Kiser, *Chairman*

DR. KISER: As an alternate delegate, I move the adoption of this report.

(The motion was seconded, put to a vote and carried.)

PRESIDENT CURRENT: We will hear the Report of the Committee on Education for Dental Assistants.

COMMITTEE ON EDUCATION OF DENTAL ASSISTANTS

The committee first met in Chapel Hill, Sunday, June 15, 1952, to formulate plans for the development of an extension (correspondence) course, through the facilities of the University of North Carolina Extension Division and School of Dentistry. It was explained by Dean Brauer that the lessons for the course could be developed by the faculty of the School of Dentistry, and that such courses would be reviewed critically by a "Standards and Evaluation Committee" of the Extension Division regarding pedagogical principles before approved or released. These courses, once approved by the instructor, by the Standards and Evaluation Committee of the Extension Division, and by the Committee on Dental Assistants Education of the North Carolina Dental Society, would be processed through the Extension Division of the University as any other extension course.

This course would be adequate in preparation for certification via examination of the American Dental Assistants Association.

Twelve members of the faculty have been working with various lesson assignments during the past months and already have expended several hundred hours in preparation of material for this course. It is estimated that the course material will have been completed this coming fall for student participation.

The American Dental Assistants Association Educational Committee and its Certification Board have expressed a keen interest in this development. In all probability the course will have wide interest and enrollers from other sections of the country.

Appended to this report, which will be of interest to many dentists of the state, is a general description of the course, including aims and purpose, as well as the outline of lesson assignments.

The following are the members of this committee and submit the report herewith: Drs. John R. Pharr, John C. Brauer, Cecil A. Pless, Burke Fox, Sylvester P. Gay, J. W. Branham, and Clyde Minges.

DENTAL ASSISTANT BASIC COURSE

GENERAL DESCRIPTION

I. Aims and Purpose of Course

The principal aim of this course is to provide certain basic information to the girl who already is employed in a dental office, as well as for the one who proposes to pursue a career as a dental assistant. This basic

course is designed from the recommended curriculum of the American Dental Assistants Association which, upon completion (including required practical experience in a dental office) should qualify the individual for the dental assistants' certification examination*. While it is not possible to afford practical dental office experience in this course, it is the objective to make available certain fundamental information which can be translated into practice, and which will enable many girls to provide a greater service to the profession of dentistry.

The clinical and laboratory assignments may be accomplished in the dental office for the girl who already is employed. The clinical and laboratory procedures related to this course, for the girl who is not employed in a dental office, may be accomplished by making suitable arrangements with her family or community dentist, or it may be completed at the School of Dentistry, University of North Carolina, during a week's period to be scheduled at intervals as required.

The course material is divided into three major sections, (A) *Dental Office Management and Procedure*, (B) *Dental Science and Practice*, and (C) *Laboratory and Clinical Materials and Procedures*. The objective in the assignments relating to "Dental Office Management and Procedure" is to orient the dental assistant with respect to her status in the dental profession, the philosophy and attitudes toward her work assignments, and her duties and responsibilities in the average dental office. The second phase of the course, relating to "Dental Service and Practice" takes into consideration the general background in science that the average dental assistant should have to perform her duties effectively in a dental office. The objective in Section C, relating to "Laboratory and Clinical Materials and Procedures," is to give the dental assistant a working knowledge of the materials generally used in the dental office, and a limited approach to laboratory procedures.

To date, there is only a small number of schools in the country which offer formal training for those who plan a career as a dental assistant. While many excellent courses, providing minimum requirements as set forth by the American Dental Assistants Association, have been and are being given in schools and under auspices of local dental societies in the larger cities, there are many girls who live too far from these centers to receive such instruction. This course, therefore, is directed to those girls who cannot conveniently enroll in a course designed for dental assistants in their own community, or who cannot pursue formal training for one or more years in college.

This course material, in order that it might be practical and have the general practitioner's point of view, was prepared by the faculty of the School of Dentistry, University of North Carolina, with the assistance of the Committee on Education For Dental Assistants of the North Carolina Dental Society.

Following the successful completion of this course, the Dean of the School of Dentistry, upon request by the student, will prepare a statement for the American Dental Assistants Certification Board, indicating that the basic course of instruction has been completed.

II. Texts and Materials

Texts Required: In addition to the mimeographed syllabus entitled, "The Dental Assistant," which will accompany each assignment, each stu-

* Applicants for certification by the American Dental Assistants Certification Board must have been (1) member of the American Dental Assistants Association for at least one year, (2) employed in an ethical dental office for two or more years, and (3) graduate of high school or equivalent education.

dent is required to have a copy of the *American Dental Assistants Association Extension Study Course Outline*.

Materials, Equipment, and Instruments Required: For those girls who now are working for dentists or who have access to an office, the materials, equipment, and instruments required will be available in their respective offices.

Girls, who are not employed in dental offices and who do not have access to a dentist's office for laboratory work and assistance, may complete their laboratory assignments as previously stated.

III. Supplementary Reading

Students may desire to know more about a given topic than is presented in this brief basic course. The following list of books for supplementary reading may be secured in the library of the dentist, by having your employer (dentist) write for a package library from the American Dental Association, 222 East Superior Street, Chicago 11, Illinois, or by purchases from the respective publishing firms.

- Swank, E. R., *Dental Practice and Management*, Lea & Febiger, Philadelphia, 1947, 318 pp. (Price \$5.00)
 Covington, Ethel, *The Efficient Dental Assistant*, C. V. Mosby Co., St. Louis 2nd Ed., 1948, 285 pp. (Price \$3.50)
 Levy, I. R., *A Text-Book For Dental Assistants*, Lea & Febiger, Philadelphia, 2nd Ed., 1948, 248 pp. (Price \$4.00)

IV. Outline of Course

Section A. Dental Office Management and Procedure: Assignment Nos. (1-9)

1. The Dental Assistant In The Profession	1
2. General Office and Patient Routine	2
3. Records	3
4. Supplies	4
5. Applied Psychology	5
6. Assisting in Operative Procedures (a)	6
7. Assisting in Operative Procedures (b)	7
8. Instruments and Their Use	8
9. Sterilization of Instruments and Materials	9

Section B. Dental Science and Practice: Assignment Nos. (10-18)

1. Dental Terminology	10
2. Dental Anatomy	11
3. Dental Physiology	12
4. Dental Pathology and Bacteriology	13
5. Anesthesia and Oral Surgery	14
6. Dental Roentgenology	15
7. Oral Hygiene and Pedodontics	16
8. Diet and Nutrition	17
9. First Aid and Pharmacology	18

Section C. Laboratory and Clinical Materials and Procedures: Assignment Nos. (19-27)

1. Dental Materials (Gypsum products)	19
2. Dental Materials (Impression Materials)	20
3. Dental Materials (Waxes and Casting Procedures)	21
4. Dental Materials (Golds and Their Uses)	22
5. Dental Materials (Amalgam Alloy)	23
6. Dental Materials (Cements)	24
7. Crown and Bridge Prosthesis	25
8. Removable Partial Dentures	26
9. Full Denture Prosthesis	27

V. Instructions and Suggestions for Study

Generally, for girls who already are employed in a dental office, study on assignments will be accomplished in the evening. It is recommended that a definite schedule for study be adopted.

It is emphasized that the material in each assignment must be understood and studied thoroughly, and that assignments which follow are in some instances prepared with the thought that the student has mastered the previous subject material. It is important, too, that the student study the course material as presented, rather than rely upon her own experiences or the opinions of her employer entirely. The opinions and experiences of her employer (the dentist) are most valuable, and a discussion of the assignments are encouraged; however, for obvious reasons the instructional material in the course must be followed.

The laboratory assignments for the girls, who are employed in a dental office, or for girls who can make suitable arrangements with a dentist, if unemployed, may be accomplished in the dental laboratory. The student, also, can study, see, work, and manipulate the various materials, instruments, and equipment in a dental office. Girls who are not employed in a dental office, and who will not find it convenient or possible to come to the School of Dentistry in Chapel Hill for a week's practical instruction, may go to one or more of their local dentists and ask if he (she), or his dental assistant, will help with the laboratory assignments. The answer usually will be "yes."

It is important, too, that the assignments be completed without significant delays, in order that continuity of thought and practical application be maintained. While the average assignment is designed to require some five to six hours of study and application, some students will complete the work in a lesser time, while others may devote extra hours on the same material or in supplemental reading and work.

A working vocabulary, with definitions, will be found with each assignment. Students should learn to use these words without difficulty in ordinary conversation. The questions at the close of each assignment are to be answered and returned for grading by the instructor.

For those girls who have not had an opportunity to go to college, and who desire to be of maximum value to their employers, as well as grow in stature individually and as citizens, additional courses in English, sociology, etc., through the facilities of the University Extension Division are recommended.

PRESIDENT CURRENT: Thank you, Dr. Pharr.

DR. PHARR: The committee would like to adopt the study course for dental assistants, which was started in 1951 under the auspices of the Charlotte Dental Society. There is demand for another such course, but no definite plans have been made.

Mr. President, as a matter of record we would like that to be in the *PROCEEDINGS*.

Before I conclude my remarks I should like to thank, our committee, Dean Brauer and his staff for the many hours spent in the work of research and literary effort in writing these articles. They are to be placed in book form. These men have been untiring in their efforts. Furthermore, this is gaining publicity throughout the country, because there is no other school in the country which has a course such as this one, to offer.

Dean Brauer has received an invitation from the American Association of Dental Assistants, to brief them this fall in Cleveland regarding this course.

Mr. President, as a member of the House of Delegates and as chairman of this committee, I move the adoption of this report.

PRESIDENT CURRENT: Is there any discussion or question on this splendid report given by the Chairman of the Committee on Education for Dental Assistants?

(The motion was seconded put to a vote and carried.)

PRESIDENT CURRENT: We will hear now from the Resolutions Committee.

DR. SAM ISENHOUR: I am reporting for the Resolutions Committee. However, the resolution I wish to present is not endorsed by the committee; it is being presented with full consent of the committee as a courtesy to the President, who has served well and faithfully during the past year, and, for many years in the society.

REPORT OF THE RESOLUTIONS COMMITTEE

WHEREAS, The successful functioning of this Society depends greatly upon capable leadership; and

WHEREAS, Past experience shows that a few good men have at all times been on the alert to find able officers from among our membership; and

WHEREAS, This activity is deemed indispensable in locating and bringing to our attention many of our best leaders; and

WHEREAS, The men rendering this worthwhile service will always be in the best possible light if our members authorize these men to function in such a capacity; therefore, be it

RESOLVED, That Article VII, Section I, of the Constitution be amended to include a Nominating Committee; and be it further

RESOLVED, That Article I of the By-Laws be amended to include Section XXII to read as follows:

"Nominating Committee—This Committee shall consist of one member from each of the five districts. Each district shall elect its member of the Nominating Committee by popular vote at the fall meeting preceding the next annual State Meeting, and the members so elected shall serve for one year. This Committee shall meet and organize not later than thirty days after the last of the fall district meetings. It shall be the duty of this Committee to make a meticulous study of the men of our State Society who give promise of executive and leadership ability. This Committee will be required to report when our State Society is in order for the election of officers. This does not exclude the usual procedure of nominations from the floor."

S. H. Isenhour, *Chairman*

PRESIDENT CURRENT: Thank you, Dr. Isenhour.

This resolution calls for a change in the Constitution and By-Laws. The Chair is therefore directed by the Constitution and By-Laws to refer this resolution to the Committee on the Constitution and By-Laws.

It is so ordered.

We will hear from Dr. Darden Eure.

REPORT OF PUBLICITY COMMITTEE

Your Publicity Committee is pleased to report that having secured the services of Mr. Robert Madry, University News Bureau of Chapel Hill, and having planned in advance a definite plan for news releases, we feel that the Program of the North Carolina Dental Society has had good news coverage throughout the state.

Darden J. Eure, *Chairman*

DR. EURE: Not being a member of the House of Delegates, I would offer this as a recommendation for your approval. — Report adopted.

DR. AMOS BUMGARDNER: Mr. President, in the absence of Dr. Elliott Motley, I should like to present the Report of the Extension Course Committee.

REPORT OF THE EXTENSION COURSE COMMITTEE

The telephone extension program offered by the University of Illinois comprising five lectures was enthusiastically received by study groups in Winston-Salem, Asheville, Durham, Raleigh and Chapel Hill and Charlotte, N. C.

A similar program will be offered in the coming year.

A refresher course "Dentistry for Children" is being offered at the University of North Carolina, June 15-18, 1953. Enrollment in this course is limited to ten.

Further courses are contemplated for the future.

As an outgrowth of the study course for dental assistants conducted by the Charlotte Dental Society, the committee worked out a plan for a correspondence course which could reach girls in small towns as well as cities. This was submitted to Dr. Wilbert Jackson, member of the A. D. A. committee on education for dental assistants and being heartily approved by him, it was submitted to Dr. Brauer of the Dental School.

He approved the idea, but thought it should be a joint project of the North Carolina Dental Society and the University, so a committee was appointed by Dr. Current, consisting of Dr. John Pharr, Chairman, with Drs. Clyde Minges, J. W. Branham, Burke Fox, Sylvester Gay, and Cecil Pless as sub-chairmen with Dr. Brauer as co-ordinator. Plans for the Correspondence course were thoroughly discussed by the committee and adopted with a few changes as a basis for beginning work. An outline of the course was adopted, and three lessons have been worked out in fairly complete shape. The project is of such size that it may be some months before the entire set of lessons are completed and the course can be offered for stu-

dents. It was originally hoped that this could be done by September, 1953, but present prospects are that it may be January, 1954.

Elliott Motley, *Chairman*

DR. BUMGARDNER: Not being a member of the House of Delegates, I should like to recommend the adoption of the Extension Course Committee's report. — Report adopted

PRESIDENT CURRENT: Dr. Branch will report for his committee.

REPORT OF THE HOUSING COMMITTEE

935 envelopes, stamped and printed by U. S. Post Office \$32.98.

Envelopes were addressed in the office of the secretary of the N. C. Dental Society.

The hotel applications were inserted and mailed by the secretary of the manager of the Carolina Hotel.

W. Howard Branch, *Chairman*

DR. BRANCH: Mr. President, I move its adoption.

PRESIDENT CURRENT: We wish to thank Dr. Branch for the splendid work he has done.

(The motion was seconded, put to a vote and carried.)

PRESIDENT CURRENT: We will hear from the Ethics Committee at this time.

REPORT OF THE ETHICS COMMITTEE

The Ethics Committee wishes to report that there have been no official reports of any violations or complaints during the past year.

H. Royster Chamblee, *Chairman*

Report adopted.

PRESIDENT CURRENT: Dr. Poindexter will give us the next report.

REPORT OF THE PROSTHETIC DENTAL SERVICE COMMITTEE

The program of certifying dental laboratories in this state has been in operation six or seven years. It is interesting to note that each year there has been an increase in the numbers of applications for affiliation. Last year thirty-five places of business were accepted for accreditation. At this time it is thought that about 80 per cent of those qualified have been certified by the committee.

Last fall it was the privilege and pleasure of one or two members of the committee along with President-Elect Sheffield to attend a part of the educational meeting of the North Carolina Dental Laboratory Association. We were impressed by the program and clearly saw that this sort of meeting means a great deal to the owners and technicians.

The North Carolina Dental Laboratory Association is alert to the illegal practice of dentistry and is giving your committee every possible assistance in the enforcement of the dental law.

An ethical laboratory looks with disfavor on a patient being sent to the laboratory for any kind of adjustment or an appliance. My committee strongly urges against this procedure, regardless of expediency of time or convenience.

C. C. Poindexter, *Chairman*

DR. POINDEXTER: Mr. President, I should like to recommend this report for adoption.

PRESIDENT CURRENT: We ought to thank these men; they have done a splendid job. Is there any question or discussion of this report?

Report adopted.

DR. PAUL FITZGERALD, SR.: Mr. President, I think we have had a wonderful session this evening, and we have done a lot of work. I am a little afraid that in succeeding sessions we may not have anything to do. It is getting late, so I make a motion to adjourn.

PRESIDENT CURRENT: There is a motion to adjourn. Would the gentleman who made the motion yield for announcements about tomorrow's sessions? Such announcements are on the table. I believe the motion to adjourn must take precedence, but I do think we should have some announcements.

DR. FITZGERALD: I will yield.

PRESIDENT CURRENT: Our Secretary will make the announcements.

SECRETARY WALKER: I have a letter from the North Carolina Dental Auxiliary: "The ladies of the North Carolina Dental Auxiliary wish to express sincere thanks and appreciation for the courtesies extended to them during the past year. Most especially we thank you for the printing of our program in the official bulletin of your Society," Signed, "Sincerely, Mrs. C. M. Parks, Acting Secretary."

We also have a note from the family of Dr. F. W. McCracken: "During a time like this we realize how much our friends really mean to us. Your expression of sympathy will always be remembered."

Here is another note: "Dr. Bernard N. Walker, Secretary, North Carolina Dental Society, Charlotte, North Carolina; Dear Dr. Walker: Will you please express to the members of the North Carolina Dental Society our grateful appreciation for the Memorial Plaque to Dr. Lineberger which has been placed in the entrance hall of the Dental School at Chapel Hill. This tribute from the men of dentistry in North Carolina to their former co-worker and loyal friend will be held in grateful memory during the years ahead.

"Again, may we say thank you, each and every one.

"The family of Henry Otis Lineberger."

PRESIDENT CURRENT: We have a motion before us to adjourn.

DR. W. T. BURNS: Mr. President, I have a motion to make, if it is in order.

PRESIDENT CURRENT: Will the maker of the motion to adjourn, yield?

DR. FITZGERALD: I will yield.

DR. BURNS: Mr. President, Members of the House of Delegates: As the elected spokesman for the delegates of Third District, I wish to present the following:

“The Delegates of the Third District of the North Carolina Dental Society offer the following motion:”

PRESIDENT CURRENT: I am sorry to have to rise and inform the speaker that he is out of order. It is customary, for a speaker who is out of order according to parliamentary rules, to not speak until the order of the House has been decided. That is a parliamentary rule, which you may read, if you so desire. If you will so oblige, you will not proceed before the establishing of order.

DR. S. W. SHAFFER: Mr. President, I should like him to read that please.

PRESIDENT CURRENT: This will take just a minute. I cannot find the exact wording, but I will read the motion to you, which would be in order at this time.

Since the gentleman has been so kind as to be seated according to instructions, I shall go ahead with the explanation. The order of business for this House of Delegates was announced when we began. The gentleman who just finished speaking addressed the Chair and was granted the floor. He began to speak out of order, or contrariwise to the order of business for this Society, as announced. The order of business for this Society gives a hearing to standing and special committees of this Society. When a member of the deliberating body wishes to interrupt that order of business, no member has the privilege to rise to that position. The Chair does not have the right to grant him that permission.

Any member desiring to speak in interruption of the order of business as announced, may so move. The motion he makes can take two or three forms. He can move to speak out of the regular order of business. He can move his question be considered out of the regular order of business. He can move to suspend the rules of the body, and have his question considered. All three seek the same purpose. This is parliamentary procedure, according to the rules laid down here.

If the gentleman who has just finished speaking wishes to move for the privilege of speaking in the order just described, the Chair would be glad to entertain his motion.

DR. BURNS: Mr. President, I move that the rules of procedure be suspended, and that I be permitted to make this motion.

PRESIDENT CURRENT: Thank you, Dr. Burns.
Is there a second to this motion?

DR. M. E. NEWTON: I will second it.

PRESIDENT CURRENT: The motion has been made and seconded that the rules of this House of Delegates be suspended and that the gentleman be allowed to present his question.

This is a highly privileged motion, gentlemen. It cannot be debated. It cannot be amended. It cannot be reconsidered. It requires two-thirds majority vote to sustain it.

All the members of this House of Delegates who favor the motion of suspending the rules to consider a special matter will please stand and remain standing, to be counted.

DR. SHAFFER: Mr. Chairman, before you vote, I do not know anything about the Constitution and By-laws, but I should like to see that in print before I believe it is exactly right.

PRESIDENT CURRENT: All right, to take up a question out of its proper order is stated in ROBERTS RULES OF ORDER, No. 1 and No. 2.

DR. SHAFFER: The reason I am interested is because I am a delegate from the Third District. The Executive Committee has asked that this motion be put before the House. As I say, I am not well versed in the Constitution and By-Laws, but my recollection is that Article I says that the House of Delegates shall transact all business of the North Carolina Dental Society.

My opinion is that this is business of the North Carolina Dental Society. Where else are you going to do it, if you do not do it in the House of Delegates?

PRESIDENT CURRENT: That is correct, but this is not in the order of business at the moment.

DR. SHAFFER: When is it in order? I do not see any other time.

PRESIDENT CURRENT: This is not in order at the moment. This matter will be in order when new business is called for, before this meeting is adjourned on Wednesday morning.

DR. SHAFFER: I think it is the man's privilege to state the motion. I believe he is due that consideration.

DR. BURNS: Provided Dr. Current is right, that this House has to have a two-thirds majority in favor of this motion, I withdraw my motion pending his searching of ROBERTS RULES OF ORDER. If he finds that he is correct, I will withdraw the motion.

DR. WALTER McFALL: Mr. Chairman, you mentioned Wednesday morning. Your order of business, which we adopted, shows tomorrow night at nine o'clock for the next meeting of the House of Delegates, if the program is correct.

PRESIDENT CURRENT: Yes, but the last order of business in the House of Delegates is new business. The House of Delegates does not adjourn, it recesses. This House of Delegates will not be adjourned until Wednesday morning. We recess tonight until nine o'clock Monday night, and then we recess again until our meeting Wednesday morning. We do not adjourn; we recess.

DR. BURKE W. FOX: Mr. President, is that the order of business that has been set up from year to year, or is that the order of business that you set up?

PRESIDENT CURRENT: It is customary for every society having a permanent association. When no rule has been adopted, the following is in order:

(President Current reads ROBERTS RULES OF ORDER.)

PRESIDENT CURRENT: These are parliamentary rules, and you may read them through. You must have a vote on the privilege of rising to interrupt the regular order of business.

However, I am willing, myself, to allow this. I have no desire to do anything except what this House of Delegates desires to do.

DR. FOX: The motion could have been voted on and everybody been out, if we had gone ahead.

PRESIDENT CURRENT: Gentlemen, this is not in keeping with the rules of order. It does not go that way. However, if this House of Delegates wishes that the Chair recognize this order of business now, the Chair has no desire to attempt to withhold it—none whatever.

DR. NEWTON: If you want a motion that we do proceed with this now, I will make that motion.

PRESIDENT CURRENT: The Chair will entertain this sort of motion. In view of the fact that some of you people seem to feel that the Chair is not entirely within his rights in ruling this matter out of order at the moment, the Chair will entertain a motion that this House of Delegates vote for this to become a matter of business now.

DR. NEWTON: I do so move.

PRESIDENT CURRENT: Dr. Newton makes the motion that this House of Delegates vote to allow this matter to come to the floor at the present time. Is there a second?

DR. SHAFFER: I will second the motion.

PRESIDENT CURRENT: Gentlemen, we are voting wrong. When you analyze it, you will see that. Nonetheless, we will put it to a vote.

(The motion was put to a vote and lost.)

PRESIDENT CURRENT: I should like to refer to the gentleman who just finished speaking, and say that the show of votes here indicates that if the matter were presented, it could not have been favorably received. These votes are about one and the same thing, as I see it.

DR. BURNS: You are not supposed to know what the motion is, Dr. Current.

PRESIDENT CURRENT: I do not know, but whatever it was it could not have been favorably received at this time, in my opinion. The House just voted that it does not wish to hear it now.

DR. SHAFFER: I still think you are wrong. I should like to see you find the rules.

DR. FITZGERALD: I just want to say there is a motion before the house.

(The motion to adjourn was seconded.)

DR. FITZGERALD: I repeat, I must insist that there is a motion before the house to adjourn.

PRESIDENT CURRENT: The motion to adjourn is not debatable.

(The motion was put to a vote and carried.)

(The House of Delegates recessed at 11:30 p.m.)

HOUSE OF DELEGATES

Second Session

Monday, May 18, 1953

The second meeting of the House of Delegates was called to order at 10:00 p.m., President A. C. Current presiding.

PRESIDENT CURRENT: Will the House of Delegates please come to order.

Secretary Walker will call the roll.

(The roll call showed the following members present:)

Officers:

A. C. Current, Sr., President
Neal Sheffield, President-Elect
C. I. Miller, Vice-President
Bernard N. Walker, Secretary-Treasurer

Executive Committee:

J. Homer Guion, Chairman
Paul Fitzgerald, Sr.
I. R. Self, Sr.

Ethics Committee:

Royster Chamblee, Chairman
Paul Fitzgerald, Jr.
A. W. Bottoms
J. A. McClung
Clyde Minges

State Board of Dental Examiners:

E. M. Medlin
W. M. Matheson

First District:

Hubert Plaster
Pearce Roberts, Jr.
Clinton Diercks
Walter McFall
W. M. Sloop

Second District:

Thomas L. Blair
Harold W. Thompson
Riley E. Spoon, Jr.
C. R. Helsabeck, Jr.
John Pharr

Third District

W. T. Burns
Maurice E. Newton
W. Kimball Griffin
S. W. Shaffer
J. L. Henson

Fourth District:

L. M. Massey
S. B. Towler
E. N. Lawrence
Walter H. Finch, Jr.
M. R. Smith

Fifth District:

W. H. Young
Paul Jones
M. M. Lilley
R. E. Williams
R. Fred Hunt

SECRETARY WALKER: I declare a quorum present.

PRESIDENT CURRENT: Members of the House of Delegates: I do not suppose there is a member of this House of Delegates who did not know there has been pending for some time a matter of a somewhat controversial nature.

Your President, regardless of the opinions sometimes expressed contrariwise, has been in a pretty tight spot for a year. A year ago when I stood here and told you that with the help of God I would serve you to the best of my ability, I did mean that sincerely. I can say to you that to the best of my ability I have done it. I have tried to be as fair as my conscience and my guidance would allow me to be.

I have refrained from speaking disrespectfully as an officer, or even in my free time, about it. I have talked with any number of members of this House of Delegates, and also with quite a number of people who are not members, but who are members of this Society. In making these observations, in making these contacts, and in listening to the conversations — and in many instances off the record advice — I have not been discriminating. Assurances have been made to me, and your Chairman has been led to believe that this House of Delegates will not dissent from his request to have this matter which is not in line with the regular business tonight, considered tonight as a special order of business. I hope I will hear no objection to what I have been assured would be the granting of my request.

In the rules of order which I have tried to abide by, from time to time those rules grant me the privilege, if there is no objection, to this request by common consent of this body. I should like to be allowed to bring a special matter forward, and to declare it in order to be considered at this time.

DR. W. T. BURNS: Mr. President, I should like to present a motion from the rostrum.

PRESIDENT CURRENT: Will you come forward, please.

DR. BURNS: Mr. President, Members of the House of Delegates: As the elected spokesman of the delegates of the Third District, at this time I wish to present a motion.

The delegates of the Third District Dental Society offer the following motion:

“WHEREAS, it is felt that the intramural practice by the full time faculty at the School of Dentistry of North Carolina has certain undesirable features;

“WE MOVE: That the North Carolina Dental Society go on record as being of the opinion that this practice as is now conducted be abolished, and the recommendations as presented by the Executive Committee of the

Third District Dental Society to the Executive Committee of the North Carolina Dental Society be adopted.”

The Chairman of the Executive Committee has the letter that contains the information that is referred to here. I will read it.

January 3, 1953

Dr. Homer Guion, Chairman
N. C. Dental Society Executive Committee
Charlotte, N. C.

Dear Dr. Guion:

In response to the letter of December 10, 1952, from Dr. Bernard N. Walker, Secretary-Treasurer, N. C. Dental Society, requesting specific objections and recommendations in regard to private practice by full time dental faculty members at the University of North Carolina, the Executive Committee of the Third District respectfully submits the following:

We recognize a widespread feeling that the entire program of private practice among the full time faculty members should be eliminated. The Executive Committee and a large majority of the membership of the Third District, feel that such a program, using state facilities, can only lead to an unhealthy situation, with many unfavorable ramifications. Upon inquiry, we have been unable to learn of any outstanding dental school using any such intramural plan. We, therefore, believe that for the best interests of all concerned, the present program should be abolished.

It is thought that if there must be an intramural program, that such a program should be on a strict referral basis. The dentists in this area feel most vitally concerned with the workings of the program. We have fully supported the Dental Foundation, and hope for the finest leaders of the teaching profession in dentistry to be attracted to Chapel Hill under the sterling administrative leadership of Dean John C. Brauer. We do not propose to tell you, Dean Brauer, or the University, how to run the dental school. We do feel that the question of private practice should be established on a firm, healthy foundation now. We would like to present some concrete suggestions that would insure lasting good relationships between the faculty and the dentists of the state. Since the intramural practice is not on an individual basis, and in view of the fact that so many faculty members are involved, it is felt that certain restrictions should be observed for the benefit of all concerned.

These follow:

1. Private practice should be limited to the hours normally practiced in the vicinity of the University of North Carolina Dental School. This would eliminate any night hours, Sundays, and legally observed holiday practice, with the obvious exceptions such as emergency treat-

ment, and work on members of the dental faculty's families. We would prefer that the graduating classes of dental students not feel it fashionable to maintain night office hours.

2. Private practice should be limited to a consultative basis.

3. We feel that patients should be admitted on a referral basis, for a specifically designated treatment or consultation, and the referral should be by licensed private practicing dentists, not to include full time faculty members, with the patient sent back to the referring dentist when the above designated work is completed. We recognize the occasional impossibility of a tight program of referral on all such cases, and that there must necessarily be exceptions, but feel that the announced policy should be as clear and definite as can be, since these faculty members are specialists in their various fields, and should be as dependent on referrals as any other specialists in the state.

4. We feel that the matter of publicity of the intramural practice members should be as limited as that of any other private practitioner, and quite separate from the publicity given the dental school.

Yours sincerely,

Claude A. Adams, Jr.
George F. Kirkland, Jr.
Maurice E. Newton
Charles H. Teague
P. B. Whittington, Jr.

/Signed/ Norman F. Ross,
Chairman Third District
Executive Committee

PRESIDENT CURRENT: A motion has been made by Dr. Burns in the material that he has read. I should like to have it stated again. Exactly what part is the motion? I believe his reading that again would be informative.

(Dr. W. T. Burns reread his motion—page 239.)

PRESIDENT CURRENT: Gentlemen, you have heard this motion read twice. Are there any questions you would like to ask about the motion. Does everybody understand what the motion is?

Dr. Burns has made a motion. Is there a second?

DR. MAURICE E. NEWTON: I second it.

PRESIDENT CURRENT: A motion has been made and seconded. Is there discussion?

DR. THOMAS L. BLAIR: As I understand it, this proposal is made as a recommendation to the University Trustees.

PRESIDENT CURRENT: Is that right, Dr. Burns? It is made as a recommendation to the University Trustees?

DR. BURNS: That's right, Dr. Blair. The North Carolina Dental Society, as we understand it, has no power to tell the University of North Carolina what they can or cannot do pertaining to the dental school.

PRESIDENT CURRENT: It is a recommendation to the Board of Trustees.

DR. BURNS: It is a recommendation from the North Carolina Dental Society to the University of North Carolina.

PRESIDENT CURRENT: Did you rise upon the point of that question, Dr. Blair?

DR. BLAIR: That's right.

PRESIDENT CURRENT: All right. A motion has been made and seconded. Is there any other discussion on this motion?

DR. WALTER McFALL: Mr. President, I am sure there are very few people in the room who could repeat the motion right now, let alone know what the full content is.

Unless we hear all about it, I do not think that the House of Delegates or the General Assembly can intelligently vote on what the Third District would like to have us do. I am not very fast on the uptake myself, and I certainly could not repeat the motion or know what is in the letter that Homer Guion has received. I was not fortunate enough to be at the Raleigh Conclave of the discussion of this meeting. Therefore, I should like to have more information, either from the Third District or from whoever would like to give that information. And I think this whole House of Delegates would like that information.

Everybody is scared to death to get up to say anything, but I haven't any better sense than to get, or to try to get, at the truth of the thing, if we are going to vote I should like to hear from Dean Brauer. I should like to hear from the Dental Advisory Committee, both past and present. I should like to hear a whole lot more from both sides, so we can definitely get this thing cleared up, and never again hear anything more about it, I hope, after this meeting. (Applause)

PRESIDENT CURRENT: Thank you, Walter.

Gentlemen, the Chair would like to add a word to what Dr. McFall just said. We have laid aside our work, and I am grateful to you people. I can tell you my heart is lighter than it has been for a long time, because the pressure has been taken off me, and I want to do the right thing by all concerned.

I should like to hear anything that anyone has to say. Any member of the House of Delegates, as Dr. McFall has just said, who has any questions or any remarks, should rise and speak. Any remarks Dean Brauer

wishes to make, or any member of the university wishes to make in connection with this motion, I feel should be made. This motion must be thoroughly understood. I heartily concur in that idea. We are in no hurry here. I do not mind staying here until four o'clock in the morning. I did not sleep very well last night, and I am accustomed to sleeping very little. So let us go ahead.

The Chair will recognize Dean Brauer.

DEAN JOHN C. BRAUER: President Eddy Current, Members of the House of Delegates of the North Carolina Dental Society, Members of the North Carolina Dental Society, and Guests: I should like to say at this time that as long as I live, I shall always be grateful for the leadership which has been exemplified this past year by our good friend and president, Eddy Current. Furthermore, I am appreciative of the leadership that has been exemplified by so many of you in following through in our past legislative program, and all of the actions that have been taken for the best interests of dentistry, not only in the state of North Carolina but dentistry at large.

When I came to Chapel Hill late in 1949, during the holidays, on my first visitation, I met a large percentage of the members of the Advisory Committee to the School of Dentistry of the North Carolina Dental Society. I also met a number of university administration, and others. In San Francisco I met Dr. Edward McGavran, Dean of the School of Public Health, and others. I told them that I was not interested in another job and that I was not interested in just another school of dentistry.

I told them, that if the University of North Carolina and if the dentists of the state, had the kind of program and the kind of philosophy that would present an opportunity to develop one of the finest schools of dentistry in the country, I would like to have the privilege of visiting Chapel Hill. So at that time, it was emphasized that we did not want just another school of dentistry. We would like to have one of the finest and most progressive institutions, wherein we would like to have a faculty of which we could all be proud.

There are all types of individuals whom one could have on the faculty roster. There are those who would come to North Carolina without question or reservation. As a matter of fact, we would not even have to invite them. They would come down to our state at any salary. That is not the kind of teacher you would want in your school. You want a faculty which will make contributions to the advancement of our profession, not only today, but in the years to come.

I am sure that you expect to have leadership exemplified. That is the kind of faculty, I am certain, which is present today at the University of North Carolina. I am proud of the associates we now have at the University of North Carolina.

One of the proposals which was submitted to me at the time of my

original visit was this: you will have, in dentistry, the same privileges, and the same responsibilities, as the clinical men of medicine. In dentistry you will be able to work out a plan comparable to that of medicine, wherein there will be a subsidy; wherein there will be an opportunity for some private practice; and wherein you can bring the finest men in dentistry available to the University of North Carolina.

Ladies and gentlemen, one of the real reasons why there are some five hundred faculty vacancies in the schools of dentistry throughout the country, is because these institutions do not have the money to obtain or to retain their faculties. That is one of the reasons why many schools are really sick. I mean professionally sick. They have not been able to attract, and to retain the kind of faculties they want and need.

I am sure you did not have in mind a faculty whom we could buy at any price. We want individuals who will retain their own self-respect. I know many teachers in America today who have lost their self-confidence. All they are doing is checking in at eight o'clock in the morning, or perhaps at nine, and checking out at five o'clock. They are men who have had fingers pointed at them in many instances. You know exactly what I am talking about, when I say, that fingers have been pointed at many dental teachers and something like this has been said: "this man cannot make a living in practice; that is why he is teaching. That man is not practical, because he is a teacher."

Well, above all we want men who are practical in the teaching field. We want men who retain their self-respect and their self-identity in practice, in the profession, and who are not afraid of their own shadows. I have no use, and I have no time for an individual who has lost his self-respect and confidence. You can walk through many institutions today where men have lost their self-confidence because they are drawing a salary check. I think that is one of the advantages, and reasons for having an intramural practice.

I came to North Carolina—and I should like to make this very clear—That all of the appointments which have been made to date, all of the contacts which have been made with various members of the faculty from various areas of the country, have been with this provision: that the University of North Carolina, that its Board of Trustees, and of course in concurrence with the Division of Health Affairs would extend the same privileges to our profession as to the medical profession in clinical areas. These gentlemen, members of our faculty, in accordance with the adopted policies which I shall read in a moment, have come to North Carolina with this understanding. They have moved their families and they have sold their former homes. They have committed themselves to the teaching program at the University of North Carolina.

I have committed myself, as have the other administrative areas which I have just referred to. I cannot turn back. We cannot turn back. In other words, the policies and the program is in effect. I would in no instance, for one moment, doublecross, if you please, the men in whom I have confidence and who have confidence in me.

On that contractual basis, as long as I have anything to do with the institution, I must be honest with myself, and honest with my God, and honest with my profession. That contract has been made in all good faith, the same as all clinical men of medicine have had that contract fulfilled. I am sure that anything that would be projected to dentistry, would also be projected to medicine.

I should like to read the definitions of the intramural and extramural work.

1. Intramural: The term implies that services may be rendered for patients or for professional colleagues by a member of the teaching staff of the School of Dentistry, within the Division of Health Affairs in clinics and laboratories. Such services would include any dental treatment, the taking and diagnosing of roentgenograms, the taking of biopsies, and the preparation of tissue sections for diagnoses and consultation.

We then have the definition of the term extramural. Extramural: The term implies and it includes . . .

Consultative service, which may be rendered in another institution or office or agency, other than the University of North Carolina, dental service on patients in a private office and lectures and/or clinics for which an honorarium is received.

Item 2 relates to the conditions and provisions under which intramural service may be rendered, for pay, by members of the full time professional staff.

2. A maximum of ten hours may be devoted to intramural remunerative services in any one week, other than during the vacation period of the individual, and other than Saturday afternoon and evenings, Monday through Saturday, 7:00 p.m. to 10:00 p.m.

The faculty has presented a letter to the Executive Committee of the North Carolina Dental Society, indicating that it would not, except in emergency, see any patients in the evening hours. In other words, we have no evening hours schedule.

With reference to the weekly time schedule of the faculty the following is presented.

From 8:00 a.m. to 5:00 p.m., Monday through Friday, and from 8:00 a.m. to 12:00 noon Saturday. I believe this represents a total of forty-four hours. Within the framework of this forty-four hours, a maximum of ten hours may be devoted to intramural practice. Each of the department heads submits to me, at the beginning of each quarter, a detailed schedule of each individual member of the faculty, as to exactly where he will be at any hour of the day during that entire period.

As for the time devoted to intramural services, it will be the responsibility of the department head to organize the departmental program and to schedule the staff in accordance with the provisions of the adopted plan.

1. The department head receives a written report each week from all departmental personnel engaged in intramural work, indicating the total time devoted to such services.

2. The department head must submit a monthly report to the dean.

Each department head to date has submitted a monthly report indicating the number of hours the personnel of his department has devoted to intramural services. Furthermore, I have the exact incomes that each individual has obtained from intramural services. Each month I transmit a report, through the administrative office of the Division of Health Affairs, to the University Administration, indicating the number of hours, and, also, the income realized by each individual.

NOW, WHO MAY BECOME PRIVATE PATIENTS? Any individual who is not obligated to another dentist may become a private patient, other than those cited in C (2). I shall read now the Provision II C (2).

C (2) A patient is ineligible for private consultation or treatment if he or she has been registered for an examination or treatment in the dental clinic of the School of Dentistry at any time during the past twelve months, unless the patient subsequently has been referred by a dentist or a physician outside of the School of Dentistry.

FEES AND COLLECTION OF FEES:

1. The member of the staff rendering the service will arrange his own fee schedule with the patient.

2. Suitable records will be developed for use by the School of Dentistry, whereby the patient will be given a statement of fee for each visit.

3. Records will be kept by the cashier, and a statement will be rendered each month to each participant, indicating his total income.

We have an assistant cashier. Each particular operator makes a contractual arrangement with his private patients. The contractual arrangement is submitted to the cashier's office in the intramural service. The operator never collects one penny of the fee. The assistant cashier collects the fee, and sends it to the University Business Office. Then, at the end of each month I send through a requisition for payment to the dentist. The University transmits a check from its Business Office to the faculty participant.

Sixty percent of all fees paid into the special fund are returned for payment to staff members.

Forty per cent of all fees collected are set aside and deposited into a special operating fund, set up by the University Business office. This latter fund may be used to cover any overhead incurred in any treatment or consultative service.

As it is now set up, 60 per cent is paid to the dentist in accordance

with the plan I have just described; while 40 per cent goes into a special operating fund.

Of the total sum, 30 per cent goes into a special operations fund, while 10 per cent goes into a maintenance overhead fund. That makes a total of 40 per cent of all fees collected. The special operating fund provides for supplies and materials, for clerical assistance, and for anything pertaining to the operations overhead of that office. Ten per cent of the 40 per cent is set aside for janitorial service, for lights, water, rent, etc.

The department head also submits a report each month to the dean, indicating the total net income from all extramural sources.

LIMITATIONS OF INCOME FROM INTRAMURAL AND EXTRAMURAL WORK: The combined net income, from the intramural and extramural services shall not exceed an amount equal to twice the annual salary of the individual staff member.

In other words, if we have an individual receiving a salary consideration on a full time basis, of \$7500, that individual could, through the intramural service, double that salary and have a total income of \$15,000. No individual on our staff today has doubled his income, I question sincerely whether any individual in this coming year will realize this potential. I know that many individuals will never anticipate anything but a token per month, on this basis. There is no anticipation for the doubling of income on the part of many, although the privilege is there, and this opportunity has been granted formally.

When the combined net annual income, from all sources, reaches a sum equal to that cited in the paragraph above, the remaining excess sum will be deposited into a special dental fund supervised by the Board of Trustees of the University of North Carolina. The moneys in this excess fund may be drawn upon by the School of Dentistry for purposes of research or additional equipment, in accordance with the policies of the University, pertaining to such funds.

There have been a number of letters regarding this program, which have been transmitted to interested parties from time to time. I will not take the time to read these letters, unless it is your desire that I do.

I am confident that in this program we will have an opportunity to develop a pattern for other schools, for the reason that one of the major problems today, is that pertaining to finances. It is this program which has permitted us to attract the kind of faculty whom you and I are proud of, and with whom we would like to be associated.

I am sure that I received and recognized the true meaning of what was portrayed to me, not only by the University Administration, but by the Advisory Committee of the North Carolina Dental Society, to the School of Dentistry. I am sure I was right when I believed, and I still believe, that in reality what the North Carolina Dental Society wants is a leader among educational institutions.

I cannot, and there is not a man alive tonight who can, develop the kind of faculty, which would carry the respect you anticipate in those men, without having the funds to obtain that kind of faculty, and then to retain them.

I believe we have the pattern. As a matter of fact, I know we have a pattern that will exemplify the kind of leadership that you and I really want.

Thank you. (Applause)

PRESIDENT CURRENT: Thank you, Dr. Brauer. Is there any other discussion?

DR. W. T. BURNS: Dr. Current, I should like to direct a question to Dr. Brauer, just for a point of fact.

Dr. Brauer, you refer to these commitments that you have made to the faculty members, commitments that the State Association and the Board of Trustees have made to the faculty members. I should like to know just what the limitations were on those commitments that you gave.

Here is the point I have in mind: recorded in the PROCEEDINGS of the last annual meeting of this society, you referred to the intramural practice as a "consultative" service. The commitments supposedly made, were not those commitments made as "consultative"?

DEAN JOHN C. BRAUER: Dr. Burns, there are many ways that one may interpret "consultative" service. I am sure that any individual alive, if he desires to do so, can pick out a word or two, or a phrase or two, and direct it in many different avenues.

The commitment that was made by the University, by the Board of Trustees — I did not say the North Carolina Dental Society made them, but that I made them and that the University made them through its Board of Trustees — and the policies that I have just read, are the policies that have been adopted. That is the contractual arrangement made with each of the individuals.

One may refer to consultative services on a very limited basis or in a very limited way, or in a more projected manner. The consultative services referred to, implies and involves the policies as submitted.

Have I answered your question, Dr. Burns?

DR. BURNS: I am not sure yet that I understand your exact definition of consultative, Dr. Brauer.

DEAN BRAUER: I think, Dr. Burns, that I have just stated the policies and the reference to consultative service, in the very broadest sense. Patients may be referred to dentists in the intramural practice by other dentists, by physicians, or anyone may come of their own accord.

DR. MAURICE E. NEWTON: In the PROCEEDINGS of the 1952 meeting, on page 183, it reads as follows:

"This plan was presented and approved by the Advisory Committee to the School of Dentistry of the North Carolina Dental Society, next by the Advisory Board of the Division of Health Affairs, and following this by the University Administration and Board of Trustees."

That is the statement you made down here last year.

DEAN BRAUER: That is entirely correct, Dr. Newton. Would you care to have me read the minutes, sir, of the meeting of November 1950?

DR. NEWTON: This is what you said last year.

DEAN BRAUER: Would you care to have me read the minutes of November 1950? I said that this was entirely correct.

PRESIDENT CURRENT: Is there other discussion?

DR. BURNS: Dr. Current. I should like to present a brief reading of a résumé from the transcript, if I may. In order to clarify the actions, as well as the objections, of the Third District Dental Society, we have a brief here of everything that has been done. It is very concise, and it will take only a few minutes.

REVIEW OF PAST PROCEEDINGS

"We feel that in order to present the objections to intramural practice of the University of North Carolina Dental School, we should first give a résumé as to what has happened in the past, leading up to these objections.

"We dentists in the Third District were offering no objections in any manner to the Dental School prior to the advent of the intramural practice. Far from that, it was felt that every man was doing all in his power to endorse the Dental School and help in any way possible. However, when we received word to the effect that an intramural practice had been instituted which was, in effect, and appeared to be, nothing more than a private practice within the limits of the Dental School, and endorsed by the University of North Carolina, we felt that a very unwholesome situation was in the making — one which would lead to discontent and friction within the ranks of dentists throughout the State. Therefore, a committee of the private practicing dentists in the Durham-Orange County Dental Society requested an audience with Dr. Brauer, with the sincere desire to cooperate and attempt to eliminate objectionable features which were developing in the school in regard to private practice.

"After meeting with Dr. Brauer on or about the first of June, and upon receipt of a letter from him six weeks later, it became quite evident that no compromise could be reached through the Durham-Orange County Dental Society, and the matter had to go to the district level.

Subsequently, the matter was taken to the Executive Committee of the Third District, and the Third District Executive Committee endorsed our action and was completely in sympathy with our objections. The District Executive Committee suggested that members of the Third District carry

this problem to officials of all other districts in the state. This was done, and a sincere attempt was made to familiarize the officials of all of the other districts throughout the state with the problem.

"Following this, the Executive Committee of the Third District requested a meeting with the Executive, Ethics, and any other interested committees of the State, to hear the problem. As you know, the specially called meeting of the State Dental Society in Raleigh on December 7, 1952 was the result. This group, as you know, went on record with an overwhelming majority requesting that the Executive Committee of the state take action and that action be taken as soon as possible to eliminate the objectionable features of the intramural program.

"It became very evident at this meeting that this was a problem which demanded some positive action at the state level, and that there were dentists interested from one end of the state to the other, as evidenced by their coming from far and near to attend.

"Following the December 7, meeting, the Third District Executive Committee received a letter from the Executive Committee of the state, requesting that the Third District provide the Executive Committee with recommendations as to what it felt would be the proper way to handle the intramural problem. This letter was presented to the Executive Committee Chairman, Dr. Homer Guion, January 3, 1953 and was also read at the special called Advisory Board meeting at the same time in Raleigh.

"As of now, objections to the intramural program have not been officially taken to any members of the University Administration, because we have felt that this was a problem which should be handled on a state level. However, we feel that the vast majority of practicing dentists throughout the state object very strongly to the intramural setup within the limits of the University of North Carolina Dental School, and that the University of North Carolina officials should know the feeling of the dentists throughout the state.

"Of course, as the situation now stands, the University Administration feels that this intramural program is being endorsed by the North Carolina Dental Society, through its Advisory Committee to the Dental School. However, we feel that the true feeling of the general membership of the North Carolina Dental Society is definitely and strongly opposed to this program, and that the University Administration should be made cognizant of this fact, and at the earliest time possible.

"To our knowledge, the only official information received by the University Administration has been given by Dr. Brauer, who, of course, initiated and motivated the intramural program; but we are confident that the whole picture, and not just one side, should be presented to the University Administration in fairness to all concerned."

That is a brief résumé of the action that has been taken by the Durham-Orange County and the Third District Dental Societies. Dr. Brauer said there have been many letters that have been interchanged, which could

be read, but they would take a lot of time. Our original intent in the Durham-Orange County Dental Society was as sincere as it could possibly be. The program, as read by Dr. Brauer, was drawn up and approved in October of 1950. To the best of my knowledge, and according to the men who have had anything to do with this, that situation was not made known to the dentists anywhere in the state, until about the time of our meeting last year in Pinehurst. Why such a program that involves so many angles and affects so many men, should not be publicized for everybody to express himself, for two years, is beyond us.

Some of you have said and intimated that the men in the local areas surrounding the Dental School are opposed to the Dental School and are trying to damage it. There is not one single man in the whole group who feels that way. We simply and strongly feel that the State of North Carolina has no right to establish privately practicing dentists in the University of North Carolina, operating under the auspices of the University of North Carolina, and supported by State funds, competing with private practitioners in the area.

We feel that if the men — and they are excellent men in the University — do not like it, if the men want to do private practice, that they should do it the same as the men downtown in Chapel Hill, Durham, and Orange County. If they want to establish their own offices, I do not think there is a man there but would want to welcome them to come in and work with them. (Applause)

PRESIDENT CURRENT: Thank you, Dr. Burns.

Is there any other discussion? Does anyone else have anything to say on this matter?

DR. HOMER GUION: Mr. President, I should like to clear up our action as members of the House of Delegates of the North Carolina Dental Society. I should like to clear up the actions of the members of the Executive Committee, as to what action was taken after we received this letter from the Executive Committee of the Third District Dental Society. I am just going to take up the actions, and let you know what our thoughts were. Of course, they will be printed in the minutes of the Executive Committee and in our PROCEEDINGS.

"Item No. 1: Private practice should be limited to the hours normally practiced in the vicinity of the University of North Carolina Dental School. This would eliminate any night hours, Sundays, and legally observed holiday practice, with the obvious exceptions such as emergency treatment, and work on members of the dental faculty's families. We would prefer that the graduating classes of dental students not feel it fashionable to maintain night office hours."

On Item No. 1 the committee was assured by Dean Brauer that the University had deleted night hours from its clinical activities.

Is that so, Dr. Brauer?

DEAN BRAUER: That is correct.

DR. GUION: I am correct in that thought.

"Item No. 4: We feel that the matter of publicity of the intramural practice members should be as limited as that of any other private practitioner, and quite separate from the publicity given the Dental School."

On Item No. 4 we thoroughly are in accord with your recommendation. We have been assured that in the future University officials will make every effort to keep future publicity of intramural activities in conformity with the code of ethics of the North Carolina Dental Society.

"Item No. 2: Private practice should be limited to a consultative basis."

On Item No. 2 the committee feels it does not have authority to ask the University to limit its intramural dental activities to consultation only.

"Item No. 3: We feel that patients should be admitted on a referral basis, for a specifically designated treatment or consultation, and the referral should be by licensed private practicing dentists, not to include full time faculty members, with the patient sent back to the referring dentist when the above designated work is completed. We recognize the occasional impossibility of a tight program of referral on all such cases, and that there must necessarily be exceptions, but feel that the announced policy should be as clear and definite as can be, since these faculty members are specialists in their various fields, and should be as dependent on referrals as any other specialists in the state."

On Item No. 3 the committee feels that a tight referral program may not be possible at all times. We feel, however, that each full time man should limit his intramural practice strictly to his specialty. We have assurance from Dean Brauer that this will be adhered to. We feel assured, therefore, that patients referred for special treatment will be returned promptly to the referring dentist at the end of the specified treatment.

The Executive Committee realizes it cannot act as a policy making body for the University, but we hope and feel that the policy making bodies of the University will cooperate with the profession in every possible way to promote harmony and good will, and will adopt policies and measures to this end, as far as they are able.

There is a little bit more, but I think that follows the course as to our actions taken at the time.

Thank you.

PRESIDENT CURRENT: Thank you, Dr. Guion.

Is there any other discussion or observations that you wish to make?

DR. RALPH JARRETT: Gentlemen of the North Carolina Dental Society: I do not expect to gain in popularity by what I am going to say

tonight, and I don't want any popularity. The Lord has given me about all I expect to get out of this world. I do not expect to stand by as the Pharisees did, and see Christ crucified, and not say anything when they try to crucify the Dean of the North Carolina Dental School.

I think the North Carolina Dental School will bring to North Carolina more than it has ever had, an opportunity to do something for itself. And being in the profession thirty-two years, it has been hard to waken the dentists to take care of themselves. I am saying something tonight that you don't like to hear, but the average man does not like to hear the truth.

We have something within our midst that is so glorified and great, we are amazed at its ability to do things for us. I have seen these things happening in our profession many times. I have seen people crucified. I have seen them moved from our midst to not only get a raise in salary, but to elevate the profession wherever they have gone. The North Carolina Dental Society helped to establish the School of Dentistry. It brought here one of the most capable men in America to run it. And it might seem to affect some of us tonight, but tomorrow it will pay dividends, because I have always believed in creative dentistry and there is enough for each man to do if he will create it in this free America, to take care of himself under all handicaps.

I do not speak only for dentistry, but I say that the men who are running our dental college are people of capability. Sometimes we become amazed that people are a little better than we are, of mentality. I will say this: in the beginning, I was not in favor of the dental school in the University. Since then, it has become a part of me and now I am a taxpayer in this state, and now that it is here, I believe in it with all my heart. When people fail to rise against that antagonism, but can say to some one, "I am for it," and then don't get up on their feet and express their opinions, I don't believe they are.

I am here defending John Brauer and the University of North Carolina School of Dentistry. My boy missed this thing by one year. He had to go earlier, but there are other men coming, and we are not in this thing just to build our own houses and to act leisurely. We are here to build a bridge for the boy that is coming on. And if we do not have the stamina and the Christian effort to carry forward the great program that the University of North Carolina has given us after we begged for it like tramps, we should be ashamed of ourselves.

We are advancing, and as we advance we must give. If we are not willing to give, we will never advance. It is only the "lazies" who lie down. We are here not to defend the Third District, or take care of the Third District. There is enough dentistry in each district for every dentist. I want to say to you that the opportunity of dentistry has just come to North Carolina, the opportunity to do things for people who pay their taxes, and the young, and the rich. There is the opportunity to grasp at something that you never had the opportunity to take hold of before.

I say to you with all my heart's confession that we ought to be ashamed of ourselves. We ought not only to have enough patients for these people, we ought to see that they get them. We ought to perpetuate this college to something that will immortalize something that you inherited and are now willing to drag your feet on.

I am for dentistry. Dentistry gave me, in my early childhood, an opportunity to become a gentleman, to become a respected man in my community. I challenge here the man who says that I fell down. You men, let me say to you, I am older than you. The only opportunity you will ever have in this world is progress. And the only reason you do not take progress is because you are too lazy to grasp it. This is a night of opportunity. The University cannot hurt dentistry. The University cannot lower dentistry. Any man in our profession that is afraid to challenge any part of making a living in dentistry today, has accepted the wrong education and does not know where he is going.

The University cannot do anything, the Dental School cannot do anything, but help us dentists. I remember very definitely that I have been on the cross too, once or twice. I can show you a few thorns. It wasn't three years ago that the North Carolina Dental Society did not advocate fluoridation of water. But in 1949 I brought somebody from New York, and we established a centralized system in Charlotte. I was accused of being a Communist—not only a Communist but a Republican. And I am admitting that I am a Baptist, too.

We shot fluoridation into the water system of Charlotte. Why? Did we want anything out of it? No. For God's sake, there is more here than we can all do. You all complain of over-appointments. You all want to get out at four o'clock. Under the system that I was born, I went to work when the sun came up, and stopped when the sun set. The only part of the year I liked was winter, then I could stop before dark. I was brought up the hard way and I loved it.

There is no competition in dentistry in America, unless you look into the glass and find the competition that is forcing you backwards. The University of North Carolina can set standards for you that really set your heart pulsing, to advancement. There is one thing that I will say: just because you are a faculty member of the University of North Carolina, it doesn't make you a bit better than the guy who is practicing dentistry. They are no better educated, and I do not want to see them publicized that way.

Dr. Brauer says they won't take any prestige, you know there are a lot of things you can do with prestige, by being a university professor. I will stand up and operate with any of them. I am just a common dentist, and I don't believe they are any better than we are. If they will reduce the prestige that they get as teachers in the University of North Carolina, I am for this thing. I don't want them to have any advertising. I will say to you this, and I am not a member of the State Board, but I have

a lot of guts. The first one in the state who advertises he is good because he is a university professor, will be gouged by me.

It is a new thing, but I want to say that you have gentlemen running this thing. They are not going to take this opportunity to rob you. I would welcome a college in Charlotte. I like competition; I have had it all my life. They didn't take competition out of dentistry tonight. They passed a law to stop advertising. They only handed you something on a platter, without competition. We had five advertisers in our city in 1935. I remember the night that Amos Bumgardener and myself hired Fred Heams to write a law for the State of North Carolina to protect our lazy selves against the advertising people. You young people don't realize this.

I saw this idea come into being, this project come into view, and I saw it passed by the Legislature in North Carolina. I am going to say this, to you: that it wasn't any one man who got this thing through. It was the North Carolina Dental Society. And it was to affect us, not the public. A lot of people have taken advantage of that thing, and they are trying to take advantage of John Brauer tonight. I don't like it, and that is why I rose up, because I am one of the quietest members of this organization. It has given me more of everything I ever wanted, and there is nothing I want from this organization — nothing. All I want is the opportunity to serve it. I don't want to be its president. I don't want to be its janitor. All I want to be is just a dentist, practicing in North Carolina, the greatest place in America, where you can practice dentistry like a gentleman.

We have a university down here. I want to say to you it is going to be here whether you like it or not. You might as well start liking it. You might as well start working with it. If those guys make more money out of this thing than I can, I am going to take my hat and put it on his head, because I know I can do that too.

I am not going to ask anything from the University of North Carolina that I cannot give back to it. I am not going to ask anything from any profession that I cannot return. I am not here begging for anything. Neither is your Dean. But you have had born here, about three years ago, something that you thought was necessary. Let's all realize, it is like owning a three-year-old child. You don't know whether it is necessary or not. Its age is three. It is aged three years old, and it causes a lot of trouble.

There is no such thing as competition in dentistry. You young men, as you speak, unnerve me. The only thing I want from this world is opportunity and a place to live in America and to practice dentistry in America. Then, all I will have to worry about is the income tax and what the Democrats put on.

I want you to believe me when I say to you the only thing I want in North Carolina is an ethical leadership, and we have got it. For God's sake,

don't crucify it because you are afraid of it. Never seek anything you are afraid of, and I have never seen anything I was afraid of, except a snake. And the Dental College isn't a snake. You have ethical people there, and they are underpaid. All you boys gripe about is some guy making more money than you. Look in the mirror. There is more money in dentistry today, just being handed out, than you want.

It is here. You have leadership and you don't recognize it. You fight it. That is one way of doing it. Another way of doing it is to get in there and swim with it and let it create dentistry.

Let me say to you men who are worried about what the University of North Carolina can do to you: it can reactivate you, make you unselfish. Thank God that I live in a state where we have a university that has a dean like ours. And thank God that I can stand up and say what I want to, in free America. What am I fighting for? Not for the dean, especially. He does not know whether I like him or not. But I am for what he is fighting for, and I am going to fight for it as long as I live. I don't care how unpopular I become among you. You boys that are afraid of progress, for God's sake get on your knees and say a prayer, and then look in the mirror. The great opportunity in North Carolina for dentistry is just started. Try to work with it.

Try to grow up. Why get small? Why be unbalanced? There are too many unbalanced people in America today; they are all neurotics.

I remember when Dr. Norton, head of the State Board of Health came to Charlotte to the Dental Society to help us get a dentist. A little old dentist came into the welfare board in Charlotte. I will never forget it as long as I live. I said, "You know you can hire a dentist for less than \$7500 a year." He said, "Doctor, do you realize I don't get much more than that." I said, "Do you own a dental degree? Then you are a disgrace to your profession. A man that would work for that in times like these with a D.D.S. degree is unbalanced."

I want to assure you of one thing. You are not going to keep the salary of a Board of Health dentist down, just because you don't know how to go out and get more yourself. Let's back our dean. Let's get behind our dean. Let's back our university as something we wanted. I say the dean of our college is a great man, and as long as I have breath in my body I have no idea of sitting still until he gets the full cooperation, of the North Carolina Dental Society. Dentistry is advancing. Let's go with it. (Applause)

PRESIDENT CURRENT: Thank you Dr. Jarrett

Is there any other discussion?

DR. O. L. JOYNER: I am at the present time one of the oldest dentists in the South. The establishment of this dental school in this state has been a dream of mine for the past forty years. I have been hoping to see a school here in our state to provide future practitioners in this state.

I have never asked anything of this Society. I guess I have spoken before this Society a few times, as anyone who has ever been a member but when it comes to this issue, I cannot sit back and say nothing.

I followed the progress very closely for the past few years as they started to develop the Medical School, and to build the hospital, and the Dental School, in the University. I think every one of us, if we will just put selfishness out of our hearts, will want to work with them to establish this great institution that is there. I have two sons who are learning to be medical doctors. I am sorry they are not in the School of Dentistry. I have been discussing this with my son who is an intern over there. He brings me the question, "Are you dentists not as big as the medical profession?"

Remember, they are not doing anything in this intramural practice that is not being done in the medical profession. Men, I would be ashamed of my profession if I have to step out and say, "I want to bow down and put myself in a lower level than the medical profession today."

I don't believe that this society wants to do that. I am behind Dean Brauer 100 per cent in building a School of Dentistry at the University of North Carolina that we, as dentists, can be proud of. I know that it is not much more that I am going to accomplish out of dentistry, but I do want to hold the name and the profession so that it will be above the common level of such little things as this seems to me to be. I hope that we, as a Dental Society, will go on record as supporting Dean Brauer in the thing that he has started and in which he is doing such wonderful work. I thank you. (Applause)

PRESIDENT CURRENT: Thank you, Dr. Joyner.

Is there any further discussion?

DR. NEWTON: Dr. Eddy, I just want to make one thing clear.

Fellows, everybody wants to make the point clear, because in all this talk that we have been listening to for the last thirty minutes or more, it has all been related to the Dental School, the school itself. There is not one single man in the Third District not supporting the school. We supported the dental school all the way through.

What we are opposed to is this private practice, that is, within the school itself. We are not opposed to a dental school. I want everybody here to hear that and to know that.

PRESIDENT CURRENT: Thank you, Dr. Newton.

DR. HENSON: I am one of the young fellows, too. I don't know how much we donated to the Dental Foundation, but I donated \$500.

I am a young fellow just starting, and I am behind this school 100 per cent. But I object to these particular features. I am behind John Brauer. I think he is very capable. But on this thing I am 100 per cent against it.

PRESIDENT CURRENT: Thank you, Doctor.

Is there any other discussion?

(The question was called for.)

DR. WALTER McFALL: Before you put that question, we haven't enough information yet.

(The members voiced, "no, no.")

DR. McFALL: I don't care whether you like it or not. We are having this meeting tonight to try to resolve something that is separating some folks in the North Carolina Dental Society. Now, listen to me for this moment, and then hate me or dislike me all you want to.

I have been through a dental college fight. I gave up my practice to go into it at the Atlanta Southern Dental College. Sidney James and myself were the only two that came out of it. We didn't have a high priced lawyer to defend us. When they were going to put us out of organized dentistry Sidney said, "Will you talk for me?" and I did.

John Brauer needs no defense at our hands. I want this thing put at where the misunderstanding occurs. Let me review the thing for you for a moment:

One day you elected me President-Elect of the North Carolina Dental Society. Now, during my tenure of office as President-Elect, ahead of me was Cleon W. Sanders of Benson, North Carolina, as President. Cleon wrote me a letter which I still have in my files. It says, "Walter, it appears that we need to have a Dental Advisory Committee, which will be composed of three men from each of the five districts in North Carolina. Now, this thing should be done at such-and-such a date, but if you will not mind, will you give permission, as the incoming officer, so that we can get the college this much farther started."

If Cleon is in the house, he can substantiate this, or say he didn't write it, and I can get the letter if you want it. Now, that Dental Advisory Committee was appointed. It was not done by me and I don't know who appointed the members, whether it was Cleon, or who. But that Dental Advisory Committee had a lot of meetings. They kept minute minutes. In the room to my left is a man who says he has all those minutes. Now, in those minutes, from John O'Rourke's survey that we paid him out of our own pockets to make, it said we needed a certain type dental service, trained a certain way. In those minutes were written things which were discussed and approved, which brought Johnny Brauer and a whole lot of fellows, to North Carolina. Johnny wasn't the first fellow we brought to North Carolina.

I went with Clyde Minges to a meeting in San Francisco and helped push Johnny. I never had any idea we would ever have him, because when I gave up my practice in Georgia and went to Atlanta to teach, I gave up a net income of better than \$8000 to work for \$4250. After I had taught for

two years, my wife said, "Baby needs shoes. Let's go back to practice. I am tired of your being a professor."

So I talked long distance and got Johnny Brauer to come to Atlanta to be head of the clinic for children. I know Johnny. I know his parents. I know his precious wife. I know his baby. And Johnny, although he is a tow-headed German, is just as straight as God Almighty ever made a man.

Johnny Brauer did not set up these things. They were set up before Johnny got here. They were set up because they had to be set up, or we would not have a dental school at Chapel Hill, or a dental school anywhere else, like this is going to be some day.

Now, you say we cannot tell the University of North Carolina what to do. Listen to me. If we cannot tell them what to do, we can give them a lot of trouble on what they do that we tell them not to do. And that is the reason we are meeting tonight, fellows, so we won't mess up something that we have done well. I have been in forty-six states in the Union, and I brag more about being a North Carolinian. They say, "You don't talk like most of those folks." No, I don't because I was born in South Carolina, and we talk worse than you do here.

Folks, I've got a little burial plot up in Asheville. And I've got a child, who, well, I don't have quite enough money to see him through. I am not thinking of anyone else. I am trying to send him to Carolina. I don't want to do anything to hurt him, and I don't want anybody else to.

Now, if something else is wrong down there, I want it cleared up. Some boys from Chapel Hill and Durham came up to Asheville to see some of us. They told us what the complaints were. A lot of those complaints have been cleared up. What the other things are, I don't know, but they need to be cleared up. I think they can be cleared up and improved, and I think we can do it tonight.

Let's not get hot-headed and talk about Johnny. Ralph Jarrett got up here and talked about a lot of beautiful things, and preached us a beautiful sermon. Well, I teach a Bible Class myself. Let's not get hot-headed about this thing. You know, you folks who are my age—53 years of age and up—you know what life is made up of. It is just made up of three things: filling up what is empty; emptying what is full; and scratching where it itches.

If some of you folks are too old to stand here tonight to clear this thing up, then you go out and stay a little while, then come back. Or go to bed. But we are going to stay here tonight, and Eddy is not going to put that motion until everybody in here says he understands what he is voting on. We want these Third and Fourth District boys to get the satisfaction, to which they are entitled. We want everybody from each one of the five districts to get satisfaction. If you have any questions and you don't know the answers, let's get those Dental Advisory Committee minutes, and let's get those men who were on it originally and who are on it now. Let's find out where the misunderstanding occurred.

Because I am telling you, Johnny is sweet and fine, and he is not smart enough to do anything crooked. Johnny did not set up this intramural thing to upset anybody. Johnny Brauer was brought here with the intramural program set up as one of the attractive things for us to get a decent faculty, and to get Johnny, because he can go to three other dental schools right now.

So let's keep it clean, and get something doing. (Prolonged applause.)

PRESIDENT CURRENT: Thank you, Walter.

As I announced a while ago, I didn't sleep a wink last night, and I don't care if I stay up all night tonight.

DR. W. T. BURNS: Dr. McFall, I was one of the boys that talked to you in Asheville. Walter told us he spoke to Dr. Brauer in California. He also said that this program was set up before Dr. Brauer came here, and it was incorporated in the original report.

I did not go to bed until I got out the O'Rourke report. There is not one single word in the report that was submitted to the State Society pertaining to subsidizing salaries in the dental school. If it was agreed that was the system which was going to be in operation, why in heaven's name didn't we know about it? Why wasn't it presented to the Society? Can anybody show where it was formulated and presented?

DR. McFALL: May I answer that? You have misquoted me on the statement of the O'Rourke report of the subsidization.

I did not tell Bill Burns that then, and haven't told him since. But John O'Rourke set it up and talked to many of us about it personally. It was one of the things that was going to be necessary.

What I did tell Bill and the rest of the boys that night, was that the Dental Advisory Committee—the Dental Advisory Committee—and Bill, you hear me right, did set up certain things that would be done. And I, personally, have never seen what they set up.

PRESIDENT CURRENT: The Chair is under the impression that Dr. Brauer read the intramural part of the service, there, Walter, in his earlier talk. I want to testify frankly that I voted for it. I know when I voted for it. I know what I said in support of it when I did vote for it.

I am saying this by way of information, Doctor, then I will recognize you. I got on my feet back here in this room in this hotel. I believe that is right. Is that right, Dr. Brauer? Was it this hotel where we adopted the intramural report?

DEAN BRAUER: It was in Raleigh.

PRESIDENT CURRENT: I wouldn't be contentious about that. But I got on my feet and I said, "Gentlemen, I understood from the beginning that something similar to this would have to be our policy. I have been scrapping with all I have to bring the necessary funds to create a Dental

School in North Carolina. Once that school has been created, and once the University is working "tooth and toenail" with and for it, I know it will be as basically sound an educational institution as it has been for two centuries, and in casting my vote for this intramural program I have every confidence under God's heaven that the University will handle it to the best advantage for our people at large. And my opinion has not changed.

DR. BURNS: I am going to concede the correction that Walter made. I think he is probably right.

When the subject of this meeting that you are talking about is pursued, this meeting where this was advised and approved by the Advisory Committee, we get into trivialities. Every time this subject is pursued we get into trivialities that arouse people. They say things that they should not. But pertaining to the meeting in Raleigh where this program was approved, there were two meetings. One of them shows Dr. Brauer told the Advisory Committee—and this certainly does not sound like the thing was a cut and dried affair at that time—he said, "Gentlemen, we have a report of it, if anybody cares to hear it." He said, "Gentlemen, we will not inaugurate this program until you have approved it."

We assumed that just one single man out of the entire group responsible for the North Carolina Dental Society would say, "Let's check that thing and see what everybody thinks about it."

We talked to the Advisory Committee members innumerable times. We can name them, but Lord knows we don't want to do it. They say, "If that is what I approved, I absolutely did not know it."

The thing does not make sense, men. Somewhere along the line somebody slipped up, and I don't know who it is. (Applause)

PRESIDENT CURRENT: Who wants to be next? There are a great many good orators in this room. I should like to get them started here before one-thirty or two o'clock, so we can get something done.

DR. NEWTON: I wonder if we could hear from the chairman of that advisory committee, of the meeting that Dr. Burns had made reference to.

DEAN BRAUER: I am sorry, but Dr. Henry O. Lineberger is up with St. Peter, I trust, and won't be here tonight. But I am sure he is listening in.

DR. NEWTON: Mr. President, can we hear from a member of that committee?

PRESIDENT CURRENT: There were fifteen members on that committee.

DR. NEWTON: "A" member. Any member.

PRESIDENT CURRENT: Is anyone in this room who was on that committee which voted for it? If so, does he wish to speak on it?

DR. BURNS: Dr. Current, I don't have my neck out far enough. I know a man who could do it. I hate to call any names, and he certainly has the privilege of refusing to answer. I should like to hear from Dr. Wilbert Jackson. He was on that committee at that time. I'd like to hear what he has to say concerning that session.

PRESIDENT CURRENT: Is Dr. Jackson in the room? (No response.) If you are in the room, Dr. Jackson, would you like to speak? (No response.)

DR. BURNS: Some man on that committee might have what it takes to come up here and tell us what happened at that committee meeting.

DEAN BRAUER: Dr. Burns, you asked the question. I have the minutes of that meeting. Would you like me to read these? They are the minutes of the meeting that you asked about.

DR. BURNS: I think it would be good and appropriate to read the minutes of that meeting.

PRESIDENT CURRENT: Would you like to know who was present at that meeting?

DR. BURNS: I know pretty well who was present there. I think, though, these other men would like to know, if you would like to read it. The rest of the men here would like to hear it, I am sure.

PRESIDENT CURRENT: Mrs. Lineberger, you have the floor.

MRS. H. O. LINEBERGER: Members of the North Carolina Dental Society, the House of Delegates, and Guests who are present: I have lived through the organization of this Dental School as none of you have lived through it. When anyone says that he did not know what went into the makings of this Dental School, I must say that he did not take the time nor take the interest, at the time the school was being set up, to inform himself of all the things that were going into it. (Applause)

You cannot take a full membership as large as that of the North Carolina Dental Society and go to each and every man, and find out what he thinks individually. But as the North Carolina Dental Society, you had elected the men, in those days, who were to see this project through. Much work went into it.

You speak of the Advisory Committee, and, Mr. President and Dr. McFall, if my memory serves me right, that Advisory Committee was appointed by Chancellor Robert House of the University of North Carolina. Is that correct?

PRESIDENT CURRENT: On behalf of Chancellor House and the University Administration, they requested that this Advisory Committee be set up. That request was granted.

MRS. LINEBERGER: I understand that it is the committee you are

taking to task tonight. I am sorry, gentlemen, that you did not take the committee to task at the time the plan was put before you.

We have, at the University of North Carolina, one of the finest schools in the country. It is a school that is laid with a firm foundation. We have a man at the head of it who is not interested in politics, dental or otherwise. He is interested in giving to North Carolina the best that can be had in the way of a dental school. Those of you who are opposed to the intramural system, I wish you would think in terms a little more of the school, and not petty, may I say it, differences.

You say, perhaps, you have sat down and calmly thought this thing out. I wish you would go back in your memories a little bit to the meetings at which the plans for this school were made. Those plans were brought to you; reports were made to you. I beg of you not to throw overboard the confidence of those who have gone before, in setting up the type school that shall be second to none in these United States.

I just had to say this, Mr. Chairman, in the memory of those who have gone on before us. Thank you. (Applause)

DR. HENSON: Mr. President, I should like to say just one word in regard to Mrs. Lineberger, whom we all cherish so much, and especially in regard to her deceased husband.

However, she made the remark that we in this Society were informed about the dental school. That is not the fact. The Dental Society has never been informed about it. It has been kept a secret from us until it was formed and put into operation. We always found out through the back door, if we ever found out at all, what was going on over there.

Let somebody deny that.

PRESIDENT CURRENT: Any other discussion? We have not had a lot of conversation yet.

DR. C. W. McCALL: It seems to me that this matter has boiled down to a vote of confidence in the administration of our Dental School. I am from the western part of the state, and probably not directly affected by these actions.

In speaking about competition, I am from a small mountain town, a resort town. In our town we compete just as surely with dentists from New York, Cleveland, and Chicago, just as though they were across the street from us. I do not think that has hurt us in any way. I do not think that it would hurt the boys from the Third District. But I think the question, tonight, is a question of whether or not we will back up our dental dean and his policies, and not question every little trivial point that comes up about this.

I am not fully aware of all the details of this, any more than the rest of you are. However, I could not help but put in these few words tonight.

I do hope that when the vote comes, our school will have a vote of full confidence of this Society. Thank you. (Applause)

PRESIDENT CURRENT: Is there anyone else who wishes to speak?

I want to emphasize again the wholehearted assurances I gave those who have constantly brought so much pressure to bear upon me. I gave that assurance just as soon as I felt I could give it, without its being voted down by opposition. I am not trying to direct something. I am directing my remarks largely to the people who brought this to the floor of the House of Delegates. They insisted that they would get this before the General Assembly in one way or another. I am ready, now, if they would so desire or so move or give me authority, to adjourn this House of Delegates and let this be an open session.

DR. S. W. SHAFFER: I am a delegate from the Third District. I should like to congratulate the gentleman from Charlotte, on his most flowery speech, but I still do not think he has hit the point.

I think, first, he crucifies some of the young fellows. I am not speaking about myself, because I am not young. But among these young fellows, I don't think there is a single one of them afraid of Ralph Jarrett or any other dentist in the school. I don't think there is a single man in the Third District who is not solidly behind the dental school, who is not solidly behind Dr. John Brauer. I think he is one of the finest men you can possibly get to come there.

I do want to make this point. Everything else has been said that has anything to do with it. The members of the Third District who are closely associated with the dental school, think that some of the features of the intramural program are not exactly what they should be. It is their idea, if possible, to get this General Assembly or the House of Delegates, whichever is going to be chosen, to recommend to the university officials certain things. They think that you can work this out a little better, and want to get the recommendations of this group. Then they can go to the President of the University of North Carolina and the Trustees of the University and say, "The North Carolina Dental Society thinks, perhaps, we can get together and work this thing out a little better."

If you pass this recommendation, the Trustees and the President will work with Dr. John Brauer, or whoever you want them to work with, and see if you cannot work this out. In case this group does not so vote, I do not think there would be any split. Not a single man would complain about it. They do not think the program is exactly as it should be, and they would like to have the recommendation of this group so they can go back to the University officials to see if some objectives can be smoothed out.

That's all it is. (Applause)

PRESIDENT CURRENT: The Chair would like to direct this question to Dr. Burns. I am not trying to push anything, I just want you boys to be satisfied.

I have had brought before me the question of the General Assembly. There are a lot of people here who might be free to speak if they were included. We are in the House of Delegates meeting at this moment, and we have one of the biggest attendances of the General Assembly of the North Carolina Dental Society—of the General Assembly and of the House of Delegates. If Dr. Burns would like to switch over, I will entertain such a motion.

DR. BURNS: Thank you very much. As you said and as we agreed, the procedure would be that the House of Delegates would handle the question first.

PRESIDENT CURRENT: Yes, that is correct.

DR. BURNS: Following that, if it were deemed advisable, it would be put on the open floor. I make a motion, if a motion is necessary, that the House of Delegates vote on this issue first. I ask for a secret ballot, if you please.

PRESIDENT CURRENT: You are now bringing in more technicalities. The secret ballot has no place here at this time. It requires a two-thirds vote.

DR. BURNS: All right, we will see if the people will stand up.

PRESIDENT CURRENT: We have thirty-nine members. You cannot get a secret ballot in an assembly discussion without a two-third's majority vote.

Dr. McFall, you have had a great deal of experience on that. Would a two-third's majority carry a vote on that?

DR. McFALL: They won't listen to anything I say. You have two motions before you, right now.

PRESIDENT CURRENT: What are they?

DR. McFALL: We have been talking one and discussing the other.

PRESIDENT CURRENT: Bill's motion, then, was that we continue in the House of Delegates. Is that right, Bill?

DR. McFALL: You have a motion on the floor on how to handle it.

DR. BURNS: Dr. McFall is correct. I made a motion originally when I started, that I read.

PRESIDENT CURRENT: Dr. Burns, it would not be necessary for you to make a motion, if we stay in the House of Delegates. The Chair merely directed a question, asking if you people would like to have it passed over. If so, the Chair would entertain a motion; if not, we will let it stay right here.

DR. HUBERT PLASTER: Mr. Chairman, that motion would have to be a substitute motion. You can only rule on one motion at a time. That

has to be the first motion, but that is disposed of. You can do otherwise, but that first motion has to be voted on or a substitute motion has to be made.

PRESIDENT CURRENT: Thank you, Doctor, you are exactly right. Dr. Burns, do you object to Dr. Walker's reading the motion you made?

DR. BURNS: Not at all.

(Secretary Walker read the resolution (page 239).)

PRESIDENT CURRENT: Is there any discussion of the motion?

DR. NEWTON: I do not know whether I can speak to the motion. What I want to refer to, is what you said about the secret ballot. Were you referring to the House of Delegates?

PRESIDENT CURRENT: Unless I am mistaken, I will stand corrected if you say so, but in it there is no provision made for secret balloting in assemblies of this sort.

The balloting, Doctor, is by "yes" and "no," by "aye" and "nay," by a show of hands, or by rising vote. Those are acceptable ways of voting in these kinds of assemblies. There is no rule of order that would give you the right to have a secret vote here, except by the rules of order, and by that we vote by ballot.

Dr. Plaster, lets have your opinion again.

DR. PLASTER: I don't think you can get a secret ballot out of this.

PRESIDENT CURRENT: You can, by a two-third's majority vote.

DR. NEWTON: I thought we were still meeting in the House of Delegates.

PRESIDENT CURRENT: That's right. But the House of Delegates has no right to a secret ballot. Any deliberations of this sort, unless it has been written into its by-laws, have no regulation for secret balloting.

DR. E. N. LAWRENCE: I should like to ask Dr. Burns a question. I am a member of the House of Delegates myself. Let's either turn this over to the General Assembly, and we will vote, or let's allow the House to vote. Let's stand up; let's vote publicly. Let us vote as the House of Delegates or the General Assembly, and let's vote now.

There is another motion that you can also have.

PRESIDENT CURRENT: There is no desire whatsoever on my part to hurry this thing along. Is there any other discussion, gentlemen?

MEMBER: I believe we should have some provision for a secret ballot.

PRESIDENT CURRENT: There is. You can by a two-thirds majority. You move for a secret ballot, and we will vote on it.

DR. BURNS: I will so move.

PRESIDENT CURRENT: It is moved that the House of Delegates vote on the motion before the house by a secret ballot. That requires a two-thirds majority in order to pass the motion just made.

DR. NEWTON: I second it.

reconsidered.

PRESIDENT CURRENT: This motion is not debatable. It cannot be. We will ask the members of the House of Delegates who favor voting on the original motion by a secret ballot, to please stand.

DR. NEWTON: Will you state that motion again, please?

PRESIDENT CURRENT: Do you understand what you are voting on? You are voting now to conduct a secret ballot on the main motion before this house.

(The motion was put to a vote and failed with 16 "ayes" and 23 "nays.")

PRESIDENT CURRENT: The motion to vote by secret ballot is lost. I do not want to push you on this at all. Are you ready for the question?

DR. S. H. ISENHOUR: I should like to ask one question simply for information. It seems the issue centers around the intramural practice at the University. Is it absolutely necessary that we have an intramural practice at the University to maintain the fine faculty that we have there now?

The intramural practice seems a small thing to me. Is the question what the individual would get out of that practice? If we have no intramural practice, and we lose our faculty, what will happen then? Can anyone answer that? Who wants to answer that?

DR. ADAM GRAHAM: I just want to say a word. As you all know, I am from the Third District, and a small town of about 1200 people.

This is the first time I have heard this question, and it seems to me you have gone around the question in every respect, but you haven't come to the point. You all do admit that we have a fine school. And we have one of the finest deans, Dean Brauer, that you can find anywhere. You cannot deny that. The only question, it seems to me, is this: our teachers are not paid, and they are not in our schools. I have the solution to this whole problem, because it is just the problem we have in our public schools down home.

As you know, school teachers are not paid well, in comparison to other professions. It looks as though this has boiled down to this one simple thing. We all like the school. We like it, and we must have it. It's just the thing the preacher from Charlotte said, and just the thing the preacher from Asheville said. I have heard Dr. McFall preach many times. That is all fine, but this boils down to this, Mr. President: it is the South. That's all it amounts to. That's all we would vote on.

Is there any way in the world that this thing can be arranged so

that we can carry on this fine school and this fine organization we now have? Can we get the Legislature, or somebody, to pay these men what they should have?

I just would like to put that before the Society, because everything else has been brought out, except that one thing, that one particular question, and it seemed to me it revolved around that one particular point. (Applause)

PRESIDENT CURRENT: Gentlemen, those kinds of questions, I am afraid, cannot be answered immediately. We can argue forever and ever about a question of that sort.

Intramural practice is the motion before the house.

DR. RUFUS S. JONES: I am not a delegate, may I speak?

PRESIDENT CURRENT: Yes, sir.

DR. JONES: I think Dr. Graham, who has just spoken, has given us the meat in the problem. We have the faculty. Most of the other talk that I have heard since I have been here is trivial. Dr. McCall said that he competed with dentists in Cleveland and dentists in New York. Most of the people here disagree with that statement. I don't believe in that statement either. I do not compete with dentists in Detroit, and neither do you, Dr. McCall.

I think we should have a good faculty. And I am for this, if that is what it takes. But I am not in favor of the Third District or the Fourth District or the district closest to the dental school, subsidizing the faculty. If the faculty must be paid more, I am not opposed to that. I propose that the State of North Carolina pay them enough, and let it be distributed among all the members. (Applause)

DR. W. KIMBALL GRIFFIN: We had a good time at Raleigh, and we talked a lot that day. Everybody had a lot of fun and made a lot of suggestions, and so forth.

I am not going to tell Dr. Brauer how to run his school; he knows how. But since everybody was coming up with solutions, I finally offered one. Somebody said, "Gee, that's a good one, although we don't like it."

Anyway, I know the medical faculty over there right now is subsidizing, through their Medical Foundation. I think that is correct. So I made a suggestion, then. Of course, I am a poor boy, and I just donate a little bit once in a while, but I would be willing to try to donate a little more to make everyone happy. Since money is the object, why don't all of us give a little more. Let us subsidize the men. Let the men carry on a practice, and let the students watch them and learn how to do it. I think that would be a good plan, if it would make everybody happy in the Third District—in Durham, Chapel Hill, everywhere around.

Of course, that is just an alternate plan. It is just another sug-

gestion. Let's say I want to see harmony, that everybody is happy. I think it could be worked out. I think that should be the general purpose here tonight, to arrive at some plan. If this is what you want, let's get to work on it. If anyone has a suggestion along this line, let's offer it. Perhaps Dr. Brauer will comment and say what he thinks about it.

Thank you. (Applause)

DEAN BRAUER: Dr. Current and Dr. Griffin, Ladies and Gentlemen: One of the questions which was asked of me in the office of the Council on Dental Education in Chicago, when it was learned that I was coming to North Carolina, was this:

They said, "John, we understand that you are to be subsidized. There are certain individuals in the North Carolina Dental Society, who have stated that the North Carolina Dental Society plans to subsidize you and the faculty."

I said, "I am not aware of such subsidization. The income I have, and the only income is the salary from the State of North Carolina."

I am quite sure that the Council on Dental Education would not look with favor upon subsidization of that type, for this fundamental reason: it is difficult to serve two masters, or three, or several hundred. In other words, the implication is, that if one were subsidized by a group within the profession, or by the North Carolina Dental Society, from a practical point of view one would not have the educational discipline and the follow-through that is warranted on many occasions. For that reason, I am quite sure the Council on Dental Education would not look with favor upon subsidization of that type.

Now, if there is any specific question regarding this item, I would be glad to discuss it further.

DR. HOWARD BRANCH: Dr. Brauer, will you give us an idea of what the salary ranges are at the University of North Carolina? I don't think any of us know.

DEAN BRAUER: The salary range is from \$4800, for an instructor on a full time basis, to \$10,000 for a professor and the head of a department.

Very recently, within the State Legislature, there was a provision for a 10 per cent increment across the board. In other words, the top salary would be \$11,000. In certain instances, however, there may be exceptions to that rule. There are individuals, who may have a larger salary depending upon individual achievements.

A MEMBER: I am not a member of the House of Delegates. May I ask a question?

PRESIDENT CURRENT: Yes.

SAME MEMBER: Dr. Brauer. I should like to ask a question: how many of the men on your faculty came to your faculty with a cut in salary from their previous teaching institution?

DEAN BRAUER: Perhaps you can answer that question. I cannot. Would you like to answer it?

SAME MEMBER: I do not know. I just asked it for clarification.

DEAN BRAUER: I hesitate to go into the personal lives of folks.

DR. W. KIMBALL GRIFFIN: Dr. Brauer, are there any loopholes in regard to the American Dental Association's actions, in regard to the funds that we have? Could there be a loophole in that the head of the department could have his salary supplemented by doing a certain amount of research work, rather than just be given, say, a general sum of money?

In other words, could that sum of money be designated for certain research that could supplement the salary?

DEAN BRAUER: There might be certain instances where the individual would not be subsidized, but the department would be subsidized to permit additional research assistance.

As for the individual, I am quite sure they would look with disfavor upon subsidization. I am not speaking of technical assistance, but on the regular academic level.

DR. W. HINSON: Would the Council on Dental Education approve of what you have today?

DEAN BRAUER: They have not disapproved it.

DR. HINSON: They have not approved it, though?

DEAN BRAUER: They have not disapproved it.

DR. HINSON: Have they approved it?

DEAN BRAUER: They have not disapproved it.

DR. RILEY E. SPOON: Has intramural practice been a general plan in other schools of dentistry?

DEAN BRAUER: There is only one other school that I am familiar with, that is following a plan. It is perhaps not as extensive, but it has the same general liberties. That is the University of Tennessee.

As I stated a little earlier in the evening, one of the reasons why we are having difficulty all over the country in obtaining and retaining men of stature within the field of dental education, is the salary or income level. For that reason, I have proposed and have endorsed, of course, the intramural practice. It is the same general plan which is common within most schools of medicine. However, as far as I know, the only other dental school presently, as liberal in a plan, is the University of Tennessee. There may be others, but I am not familiar with them.

DR. SPOON: There is one statement I should like to make about this intramural work.

The University of Maryland, I think it is, had instituted a like program with no limitations. That was in force during the years of 1939 to 1941. It was abolished in 1941, but they were finding (and this goes back to the financial thing again) that the terms were not adequate to support their needs. The school cannot carry itself, because the clinic does not carry itself or function that way. People were making money because of the war effort, with the result that you could not find enough patients to bring into the clinic.

Although it was abolished, at the time it was in force there was no limitation at all upon the practice. It seems that your ten-hour maximum is a limitation.

DR. RALPH FALLS: I am not a member of the House of Delegates, but may I speak?

PRESIDENT CURRENT: Yes, Sir. Everyone can have the floor once tonight.

DR. FALLS: We have had Sunday School teachers and old-time preaching tonight. I spoke myself. I have said many times the reason I enjoy talking to a group of youngsters of ten or eleven years of age, is that we are on the same mental level. We understand each other.

There are several things I should like to get straightened out in my own mind. The first is the principle of intramural practice. I am personally 100 per cent in favor of Dr. Brauer. I do not think that any man living is infallible. When we first started talking about the dental college, I was speaking to one of our fellow practitioners who was on the Advisory Committee. After having had a short postgraduate course under Dr. Brauer, I remarked I certainly would like to get Dr. Brauer. I think he is the finest, most practical dentist that we could get. But I reckoned that was just a pipe dream.

The next thing I heard was that we had Dr. Brauer, and I am just as thrilled as any other friend of his who knew him.

I still am 100 per cent for Dr. Brauer, and I still know that he is a man and can make a mistake. And in my heart, it is a mistake for the state to subsidize private practitioners, private enterprise, that while he is on a full time basis to subsidize him and let him practice private dentistry. As Dr. Brauer so aptly said, you cannot serve two masters. Are the teachers at the University of North Carolina going to be masters of the teaching profession, or the practicing profession?

Sure, they can do private practice, and teach—both. But I have done a little inquiring around at some of the other universities, with some of the students. This was at Tennessee, namely, because that does have some of this intramural practice. Some of the students told me that they practice

and have their offices right in the dental college. When a student has a question, he worries and wonders, "Should I go in and bother him, during his private practice?"

Literally, some of them were afraid to bother their professors. We introverts do not have the brass that the others do. It was the general opinion that there were certain values which marked that standpoint of the intramural practice. There also were some disadvantages.

I have also been told that if you start the practice of subsidizing with state funds—listen to this, gentlemen—what will be the end? They cannot keep as many as they need in state institutions now, and our model public health program, for which Dr. Branch is so noted far and wide, will disintegrate. He has a hard time keeping them together now. What will be the end if we continue to let this thing go on? I do not pretend to be right. I am just giving my little, small-town opinion, why I cannot go along with intramural practice.

I do know we have to pay them. But if we subsidize them what would be the end? Where would we stop? I am for paying them through the Dental Education Foundation, and paying them to teach the boys and serve one master—the teaching profession. And if they master that to suit the needs and wishes of everybody that loves the School of Dentistry of the University of North Carolina, that will be a man-sized job. (Applause)

DEAN BRAUER: I am familiar with the program at the University of Tennessee. That is why we have very strict schedules, where in we have in the general policies, that the head of the department must, at the beginning of each quarter, list specifically and exactly where each instructor will be at all times.

There are schedules each week, wherein the participant can devote a maximum of ten hours in intramural practice. That teacher is not scheduled for clinic or for laboratory at this time.

Now, as far as the state subsidizing the salary of the faculty, a little while ago we indicated that an individual practitioner having a \$100 income, \$40 of each \$100 would go into the operational overhead of the program. Only 60 per cent goes into the salary schedules. I should like to remind you that the School of Medicine, in its clinical area, has a comparable program. They recognize that it is essential, that some private practice be permitted, in order that the School of Medicine may attract men such as Nathan Womack, Charles Burnett, and many others, whom they could not possibly afford, if they were to rely upon the moneys available from the State Budget.

One of the problems, of course, in a state university, as in all universities, is that they cannot afford to pay a \$25,000 salary, for example to a chief of medicine, or a chief of surgery, or in any other area. They cannot, for the simple reason, that it would throw out of balance the salary

schedules with the university. Therefore, the School of Dentistry and the School of Medicine and all such areas, must stay somewhere within the range of reason in terms of state salary.

Therefore, virtually all schools of medicine throughout the country have the privilege of private practice. In our own school, and in the School of Medicine, we have a limitation of income. The chief of surgery, the chief of medicine, the chief of obstetrics or gynecology, or whatever area you may have in mind, has the opportunity of realizing twice his annual base pay.

I trust I have answered your question, Ralph.

DR. MOULTRIE TRULUCK: I think almost everyone else here will have a few words to say about this, and I was hoping I would have the courage to come forward. It seems as though I will have to take myself in hand and say a few words to defend the feeling I have towards intramural practice, as it is set up.

I think too many here tonight have already muddled this for us. I sincerely hope I will not. My good friend, Walter McFall, whom I love dearly, God love him and rest his soul. I hope I will not go overboard like he did, but let's get the issue straight.

We love Dr. Brauer. He taught me in dental school and he has taught a lot of you men here tonight. He gave us a good education, we think we have a fine school, and we are all in favor of it. But that is not the issue. The issue is solely not doing away entirely with this intramural practice, but eliminating the objectionable features. I see no objection to having it on a strictly referral basis.

Some of you said it will not work. Well, a few years ago I decided to limit my practice and depend on the other men. It wasn't too many months that I suffered from lack of food or clothing. Furthermore I don't know of any other man who has chosen such a course, who has suffered. I am sure that no member of the dental faculty who wishes to do any intramural practice on that basis, which is the recommendation made by the Executive Committee of the Third District, and which motion we are voting on, will need to suffer. If that motion is passed, I am sure in my heart it will be a happy solution.

Too many wounds have already been made. We had a meeting in Raleigh all day, from ten to five on Sunday, December the seventh. Everybody got up and talked. We finally took a vote, just as an expression of opinion of the members present. I do not recall the exact vote, could anyone tell me what the vote was on that day? Can you tell me the number disapproving of the intramural practice setup, and those who voted in favor of it?

DR. BURNS: Approximately 60-20 in favor of eliminating objectionable features. There were approximately 125 men there at the beginning of the day, but some of them were worn out and were not there to vote. The minutes of the meeting are recorded on tape.

DR. TRULUCK: Dr. Burns says approximately sixty voted to disapprove the intramural practice in its present setup, and twenty voted to sustain it.

I happened to travel to Raleigh from Asheville on that particular Sunday. I went down on Saturday and got there ten o'clock Sunday morning. I finally had to leave at four-thirty. That afternoon they still had not voted, so I do not recall just what the vote was.

Let's don't make any enemies. Let's be peaceful and be friends. I have already heard too many ill remarks on both sides. Some of the faculty are very bitter toward some of us who are opposing this. I see no reason for that. I would be glad to walk up to any man on the faculty, even though I oppose this in its present setup, and shake his hand and discuss the matter with him. Let's keep it on a friendly basis. Let's leave personalities out. Let us settle this thing. It is too big an issue to make so many people unhappy and cause too many wounds that, perhaps, will never heal.

Both sides have their points. There are points on both sides. Let's vote on this thing and settle it in a peaceful way. Then, those that are opposing one another, let's walk up and shake hands and say, "Let's all be happy."

We do not want to abolish this. We are not fighting the dental school. We are solely and purely in favor of it. We are proud of it. And, Dr. Brauer, I hope you and I will always be good friends, as we have been, and that you will have no ill feeling towards me, or any of the other members the faculty, on account of the position I have taken. It is purely and simply a matter of principle. I just do not think we should have anything in the state that would cause this much dissension.

Does anybody else want to talk? They said we can talk all night. I have taken up enough time. Let's keep it on a friendly basis, and let's vote pretty soon. I hope we can go to bed and get a good night's sleep, because we have another day tomorrow, and also another half-day.

DEAN BRAUER: One of the fundamental reasons, why the pattern of pure reference has not been acceptable procedure, is because we do not feel, nor do certain areas of our administration feel, that we should have the faculty of the university, regardless of what level that faculty might be, or what individual in the state might elect to come to the intramural practice, be obligated to first go to a private practitioner and ask if they can be treated in the intramural area.

There are many individuals, who would not elect, and who would resist the necessity of going to a downtown practitioner, or to their own practitioner of choice, and asking him if they can be treated in the intramural practice. I recognize there are many specialties in dentistry, and I, too, have limited my practice to a specialty. I think all specialties, of course, live on referrals. But they are not all referrals from other dentists. They are also referrals from other patients, satisfied patients.

I think if one would analyze the average specialty practice, he will find that a large part of his practice, or a fairly high percentage of referrals, come from satisfied patients, and not necessarily from other dentists.

I am quite sure that a pattern, wherein the dentist would be the only privileged one to recommend patients to the intramural practice, would never be acceptable. For these fundamental reasons, there is strong objection to it.

DR. J. HOMER GUION: I should like to ask Dr. Brauer a question. In your opinion, what would be the advantage, among our schools, should this motion be passed at the present time, and what would be the disadvantage?

DEAN BRAUER: The question was, what would be the effect upon the school if this motion is passed.

I certainly would not want to make any predictions as to what the effect might be. I am sure the University Administration, and the Board of Trustees, would review the content of the motion and give it very careful consideration.

You must recognize, that the University and its Board of Trustees have made commitments to these gentlemen, including myself. So if those commitments are to be honored, then, of course, the University Administration would have to take a very serious and long look at the proposal. Certainly, there would have to be a solution and a re-evaluation of that commitment to all our full-time faculty.

I cannot predict what the outcome would be. However, I should like to re-emphasize again, that firm commitments have been made not only to the School of Dentistry, but to the School of Medicine. I assure you that the whole pattern relating to the School of Medicine and the School of Dentistry, would come under consideration. I assure you, also, that the School of Medicine would be treated the same as the School of Dentistry, and vice versa, because we are all in the same program and pattern. We both come under these provisions.

Have I answered your question?

DR. NEWTON: May I direct a question to Dr. Brauer?

Referring to the medical men over there, Dr. Brauer, are those medical men making home calls?

DEAN BRAUER: The answer is no, Dr. Newton.

DR. NEWTON: Yes, I see. I just want to bring up a point there.

DEAN BRAUER: Dentistry does not usually have home calls.

DR. NEWTON: You cannot compare the two.

One thing about the School of Medicine is that these men are not making home calls. That is, the general practitioner — I am speaking from a local situation — does not have that to contend with.

The next thing is that the local physician is on the hospital staff, just as he is on a staff in any part of the state. He can go there and use the facilities in this hospital, just the same as a man on the staff of a hospital. That is another difference.

DEAN BRAUER: Would you also like to ask, and tell the audience, whether they are on the private practice level or on the teaching level?

DR. NEWTON: The principle is there.

DEAN BRAUER: Would you tell the audience, please? Be specific. Call names and tell me whether they are on the private practice level or on the teaching level.

DR. NEWTON: Both.

DEAN BRAUER: Do you mean that Dr. Patterson, for instance, is on a private practice level?

DR. NEWTON: No. The point I am making is this, he can take his patients over there. I do not mean he can count on private practice.

DEAN BRAUER: Would you like the privilege of bringing your patients to the School of Dentistry?

DR. NEWTON: That is not my point.

DEAN BRAUER: Those are the differences between the practices of medicine and dentistry.

DR. NEWTON: You made it sound as though it were all the same thing. There always will be differences, as long as you and I are alive.

DR. GUY R. WILLIS: I think the point Dr. Newton was trying to make is that there is a comparison made between the private practice of the Medical and Dental Schools. It is very understandable.

There has been a direct comparison made between the practice of medicine and the practice of dentistry, as far as the University of North Carolina is concerned. The statement is made that the medical doctors at North Carolina, and the teaching staff, if I understand this correctly, have unlimited privileges. They carry on an unlimited private practice. Therefore, the same thing should be true for dentistry.

Now, my understanding is that at the University of North Carolina these men in this hospital who carry on this private practice and teaching duties, do not make home calls. I know it is true of another large hospital. That protects the men who are practicing medicine downtown. The people who are living in the city naturally want a physician who will come to their homes when their youngsters are sick, or when some member of their family is sick. They do not want to have to take them out of bed if they have a fever, and take them to the hospital. If that physician wants to refer them to that particular hospital, that is his business, but these medical doctors practicing in the town are protected.

That is an entirely different thing as far as dentistry is concerned. The patient always comes to us, unless it is a case of extreme emergency. Therefore, I think the comparison between medical and dental setups are not a true comparison. I feel the dentists in the North Carolina Dental School should be able to walk down the hall and hold their heads as high as the medical doctor does. There is no objection to that. I am very happy to see the men teaching there getting good salaries. I should like to see them get better salaries.

However, I do think there certainly should be some control to it. I think the issue has been very confused. We have heard speeches made. I do not teach a Bible class and I did not think that that was a requirement. I do not think that what is implied is just a slight remark. The issue is quite confused, I think. The point at hand is, do we approve of the intramural practice as it is now set up in the North Carolina Dental School? The suggestion of the Third District is not to eliminate it, but to put it on a more consultative, referral basis.

If I remember it correctly, this is Dr. Brauer's address to the General Session of the 1952 meeting. I should like to read this, from Dr. Brauer's report to the General Session. This plan, which is under the title of "Faculty Private Practice: Consultation:" says the following:

"This plan provides that full-time faculty members may devote a limited amount of time to the conduct of a private practice, when such practice does not interfere with their teaching assignment and other academic responsibilities. One operating room has been provided for each department. Patients for such private practice, who are residents of North Carolina, may be referred to any of the faculty members by another dentist or by a physician. While any individual may present himself for dental service at the University student clinic, only patients who are referred by a dentist or a physician may become private patients of the staff.

It does not seem to me that that is the setup we have over there now. I would be in favor of this consultative and referral practice. I think it would be a very healthy thing for the staffmen there to keep their hands in, in private practice, and I think this would be one way to do it. There is definitely no argument against the men there making money. As the gentleman from Charlotte said, we would welcome the competition. We would be happy to see every member of the faculty come over to Durham and open his office, and we could all keep our heads above water.

That is not the point. It goes much further than that. We are contesting a point. I think this assembly must make a decision on it. After the House of Delegates comes to a decision, and after the General Assembly has made its decision, I am quite sure our district will abide by that decision. We are not soreheads. We want a decision from this group. It will go through proper channels. If it is in our favor, fine. If it is not in our favor, I am sure we will accept it.

Thank you. (Applause)

PRESIDENT CURRENT: Gentlemen, I do not want to hurry this thing, but it is getting awfully late now. I have no right to close your debate, gentlemen. Are you ready for the question?

DR. RUFUS JONES: I want to ask this question of Dr. Brauer. Was that a direct quotation from your speech of 1950?

DEAN BRAUER: Yes, I think that was a direct quotation which Dr. Willis read from the PROCEEDINGS at that time.

Also, I think if he will follow through in the interpretation, we indicate that certain overall general policies had been adopted by the faculty, by the Division of Health Affairs Board, by the University Administration, and by the Board of Trustees. The present policies, which we have discussed, permit the acceptance of patients by reference from physicians, dentists or a satisfied patient.

PRESIDENT CURRENT: Are you ready for the question?

DR. ROYSTER CHAMBLEE: Friends, Gentlemen of the North Carolina Dental Society: We are all ready to go home and go to bed, if we can get this settled tonight.

I hope that I might have a solution. I should like to make a substitute motion to Dr. Burn's motion. I am proud of dentistry. I am proud of the things that the North Carolina Dental Society has accomplished, just as I am proud of the things that my family have done. I would be as ashamed of any mistakes we might make here tonight, as I would for anything that my son might do to reflect on himself, my wife, and I.

The substitute motion that I should like to make is that the resolution Dr. Burns has made be directed to the Dental Advisory Committee, if that is the name of it, rather than to the trustees of our university.

Gentlemen, I could go along with that, because I have a great deal of respect for the integrity and the intelligence of this Advisory Committee. It may be that they have made mistakes, but believe you me, they are alert now. I have all confidence that this committee and our good friend, Dr. Brauer, over the months and the years to come, will work out solutions that will be acceptable to us all.

I should like to make this as a substitute motion.

PRESIDENT CURRENT: Thank you, Dr. Chamblee.

Is there a second to the substitute motion?

(The motion was duly seconded.)

PRESIDENT CURRENT: Is there discussion?

DR. CHARLES McCALL: Is it in order to ask Dr. Burns if he would accept that?

PRESIDENT CURRENT: No, any motion is open to any kind of subordinate or substitute motion. The substitution takes precedence over the main motion.

If you amend the motion, you must ask for the privilege from the man who made the motion originally. But a substitute motion takes precedence over a main motion, and we have to entertain that motion first.

Are you ready for the question? The substitute motion is that the motion Dr. Burns has made before the House of Delegates be directed to the Advisory Committee of the School of Dentistry of North Carolina, rather than to the school and the Board of Trustees of the school, as was his motion. You are voting now to direct this matter to the Advisory Committee of the School of Dentistry.

DR. BURNS: How can my motion be referred to the Board of Trustees?

PRESIDENT CURRENT: Your motion has a substitute to refer it to the Advisory Committee. That is the substitute motion.

DR. BURNS: Didn't you say instead of to the Board of Trustees?

PRESIDENT CURRENT: I understood your motion was directed to the North Carolina University School of Dentistry.

DR. BURNS: No, sir; no, sir. That is certainly wrong. My original motion has been given to our Secretary.

PRESIDENT CURRENT: We will have your original motion reread and then see if Dr. Chamblee wishes to have his substitute motion stand.

(Secretary Walker reread the resolution (page 239).)

PRESIDENT CURRENT: The main motion is that the practice, as set up at the University, be abolished. We cannot abolish it.

DR. BURNS: We are making recommendations.

DR. FRANK G. ATWATER: I believe that this motion desires an opinion of this group in this hall tonight. It is merely your opinion, and as to how that opinion is handled is up to the general session.

PRESIDENT CURRENT: Dr. Chamblee, do you wish to say anything further about your motion?

DR. ROYSTER CHAMBLEE: Dr. Burns read, sometime ago, a number of resolutions which he directed to the Trustees. That is what the substitute motion is directed to.

(The members voiced "no, no.")

PRESIDENT CURRENT: Just a moment, gentlemen.

DR. CHAMBLEE: That is not directed to the Trustees?

PRESIDENT CURRENT: They say it is not directed to anyone.

DR. CHAMBLEE: I withdraw my motion.

PRESIDENT CURRENT: Are you ready for the question on the main motion, which is before the House? Are you ready to vote on it?

DR. BURNS: The main motion is before the House of Delegates. Is that correct?

PRESIDENT CURRENT: The motion you have previously read two or three times, is before the House of Delegates now.

MEMBER: What would be the final disposition of this?

PRESIDENT CURRENT: That has been asked, and Dr. Brauer has answered it.

There is no definite prediction. It certainly will get a very close going-over by the University officials. I believe that is what Dr. Brauer said.

MEMBER: The inference is that it really goes to the Trustees.

PRESIDENT CURRENT: There is no knowing as to what disposition will be made of it, where it would go, if this motion is passed.

We want an opinion here where it will go if this motion is passed.

DR. BURNS: I think the question can probably be directed to the officers of this association. I do not know where it would go. We want to find out what these men think about this proposition.

PRESIDENT CURRENT: Thank you, Dr. Burns.

The question is before us.

DR. V. M. BARNES: Before we abolish the present policy, it seems to me we ought to work out some other policy.

PRESIDENT CURRENT: We are not going to abolish any policies, Dr. Barnes, and we have no authority to work out any other policies.

We are merely expressing an opinion here.

DR. McCALL: Does the recommendation or the resolution carry definite recommendations?

PRESIDENT CURRENT: Yes, sir, but they are not directed to anyone, as I understand it.

Is that right, Dr. Burns?

DR. BURNS: That's right.

PRESIDENT CURRENT: These recommendations are not directed to anyone or any institution. Is that right?

DR. BURNS: That is right.

DR. RILEY E. SPOON, JR.: May I direct a question to Dr. Brauer?

PRESIDENT CURRENT: Yes, sir.

DR. SPOON: Dr. Brauer, did you state the Council on Dental Education has not disapproved it?

DEAN BRAUER: Dr. Spoon asks whether the Council on Dental Education approved the plan. The answer is that they have not disapproved the plan.

DR. SPOON: In that case, we are saying certain things, if we take action tonight. Whatever we decide to do, Dr. Burns may take it to the Board of Trustees of the University of North Carolina, it would be in contradictory evidence of what the American Dental Association might recommend, approve, or disapprove.

It would seem the Board of Trustees would certainly have a hard time making up their minds. Why not wait for the American Dental Association? They are people who study these problems. Then, there is the Council on Dental Education. Apparently they should know what would be the better program.

DR. NEWTON: There is no decision.

DR. SPOON: They will have to make some decision.

PRESIDENT CURRENT: Ladies and Gentlemen: Please be patient just a few more minutes. We are going to adjourn this meeting some way or the other here, shortly. It cannot go on indefinitely.

DR. GUY R. WILLIS: What I have to say is very short.

Even though the Council on Dental Education does not disapprove this, I do not believe they have approved it, either. It is my opinion that they are looking with very sharp glances at what is going on here. I do not see why we necessarily have to sit back and let the American Dental Association make the procedure, when they are looking for the procedure from the North Carolina Dental Society.

In the second place, it seems to me that there has been enough discussion, to the extent that this House of Delegates should be able to formulate an opinion as to how they feel about it. (Applause)

DR. RUFUS JONES: President Current, I beg to stand once more. It seems like the question now has come around to what they have approved or disapproved.

I know it is getting late, but there has been only one dental school mentioned, in the United States, who has a similar program. Now, how many dental schools are there in this country? I don't know. But there has been only one mentioned that carries a similar plan of operation. So I would say, Doctor, according to the weight of evidence, that there is one against the rest.

DR. McCALL: Mr. President, I marvel at our Dean's patience.

I wonder if it is our job to administer the dental school, or our job to slip it into a corset or straightjacket. I think that we have capable men running our school and formulating the policies. I think we certainly ought to back those policies up, and those men up. (Applause)

PRESIDENT CURRENT: Thank you, Dr. McCall.

DR. CHAMBLEE: Gentlemen, we are just as far from the solution as we were. May I offer another substitute motion?

(The members voiced "no, no.")

DR. CHAMBLEE: I am going to offer it anyway.

PRESIDENT CURRENT: Let us have order. Any man has a right to make a substitute motion to a main motion.

DR. CHAMBLEE: I move that this whole question regarding intramural practice be referred to our Advisory Committee to the Dental College, for them to work out a solution with Dr. Brauer, the Trustees, and the University of North Carolina.

MEMBER: Mr. President, who is on the Advisory Committee? Would you name them?

PRESIDENT CURRENT: We will ask Dr. Bernard Walker to read the names of the members of the Advisory Committee. He has them here.

(Dr. Bernard Walker read the names of the members of the Dental College Advisory Committee to the University of North Carolina, in order by districts.)

PRESIDENT CURRENT: A substitute motion to defer this entire matter of the intramural practice to the Advisory Committee (the names have just been read) for working and planning with Dr. Brauer and the University officials.

Is there a second to that motion?

(The motion was duly seconded.)

DR. TRULUCK: Mr. President, are those people present whose names you just called out? Let them stand so we can see who they are.

PRESIDENT CURRENT: Whether they are here or not, Doctor, will have no bearing on the motion.

DR. TRULUCK: It is going to have a bearing on it. Aren't they going to vote on it?

PRESIDENT CURRENT: No, sir—we are going to vote; the House of Delegates is going to vote.

DR. McCALL: I am sure every one of those men would like to have an expression by which to go on when they make any ruling. I do not believe

there is a man whose name you read, who would not like to know how the Society feels about it.

PRESIDENT CURRENT: I am sorry, sir, but we have a substitute motion to the main motion.

DR. HARRY A. KARESH: I believe you made the statement that we would hash this thing out tonight, and you boys would get an opinion one way or the other.

I would suggest that Dr. Chamblee withdraw his motion and let us vote on the main motion. Let's get it over with.

PRESIDENT CURRENT: I will direct that recommendation to you, Dr. Chamblee.

The gentleman has suggested that you withdraw that motion.

DR. CHAMBLEE: No.

PRESIDENT CURRENT: He does not yield. He insists upon its being voted on.

DR. V. M. BARNES: My idea of turning it over to the Advisory Committee, is that they can work it out. Maybe they can work through the school, and perhaps compromise. Then, perhaps, everybody will be happy. That could be done, instead of our just saying "yes" or "no."

DR. HENSON: Hasn't that problem already been turned over to the Advisory Committee?

PRESIDENT CURRENT: That would make no difference. We have a motion which we have to dispose of. I cannot delete the motion. The gentleman has the right to put his motion.

DR. NEWTON: The thing is, this question has been kicked around from one committee to the other committee for a year now. We want an expression of this group in this room tonight.

PRESIDENT CURRENT: Can you tell me how to get that motion off the floor?

DR. HENSON: Is the gentleman afraid of a vote, of a "yes" or "no" on this? We have discussed this for a year. Are you scared of a vote?

DR. KARESH: As I understand it, this substitute motion is not a substitute motion whatsoever.

PRESIDENT CURRENT: It is.

DR. KARESH: No, sir. It does not ask for the same purpose. It does not cover the same purpose whatsoever. It has nothing to do with the original motion. (Applause)

PRESIDENT CURRENT: Do you so move?

DR. KARESH: I so move.

PRESIDENT CURRENT: It is moved that the substitute motion is not in order, because it does not apply to the main motion.

Is there a second to that?

(The motion was duly seconded.)

PRESIDENT CURRENT: That motion is seconded. Is there any discussion?

DR. NEWTON: Will you please read the motion?

PRESIDENT CURRENT: Dr. Burns' motion? The main motion?

DR. NEWTON: No.

PRESIDENT CURRENT: Dr. Chamblee, will you please come forward?

DR. NEWTON: No, no. This last motion.

DR. L. M. MASSEY: This last motion is out of order. As far as I am concerned, I am with you to let you see what the opinion is. However, this last motion is out of order.

PRESIDENT CURRENT: Let's please be quiet, gentlemen.

At the moment we now have the substitute motion, which is to refer this whole matter of intramural practice to the Advisory Committee.

DR. BURNS: If that substitute motion is in order, I wish to make another substitute motion for that substitute motion.

DR. MASSEY: You cannot make another substitute motion. You can only move to adjourn.

PRESIDENT CURRENT: You cannot make a substitute motion to a substitute motion, Dr. Burns.

Let's have order, please.

DR. CHAMBLEE: Gentlemen, I am perfectly willing to withdraw that substitute motion and vote on anything you like. We will just vote as our hearts desire. (Applause)

PRESIDENT CURRENT: Just one minute, gentlemen. I want this motion understood, before you vote on it. We will ask our Secretary to read that motion once again.

(Secretary Walker reread the motion (page 239).)

PRESIDENT CURRENT: This point has been brought up again and again—they are moving that it be abolished. You are adopting the rest of this material that was read, that they gave, as the policy.

Does everyone understand the motion?

DR. RALPH JARRETT: I do not sanction this motion, because the Third District does not rule the North Carolina Dental Society. I am not speaking against it, or for it.

I say that there are five districts in this Dental Society, and I say there are still five districts. You boys who are out in the Third District, ought to vote to suit yourselves.

(The question was called for.)

PRESIDENT CURRENT: This question has been called for time and time again. You have heard this motion read again. The Chair sees no other course but to put the question.

(The motion was put to a vote and lost; eleven voted for and twenty-one against the motion.)

PRESIDENT CURRENT: The motion, Dr. Burns, is lost.

We have a good, sizable number of the General Assembly present now. Do you desire to open the General Assembly now?

DR. S. W. SHAFFER: Due to the fact that so many of the members of the Society have stayed up this late, and because some might have missed this opportunity, I have this to read:

"The following members of the House of Delegates hereby file a minority report, dissenting from the action of the House of Delegates, and appeal to the General Session of the Society for its consideration in regard to the intramural practice as now conducted at the University of North Carolina School of Dentistry."

/Signed/

William T. Burns
Maurice E. Newton
S. W. Shaffer
M. M. Lilley
Clinton Diercks
George F. Kirkland
Pearce Roberts, Jr.
Thomas L. Blair
James L. Henson
W. K. Griffin

PRESIDENT CURRENT: Thank you very much.

The Chair declares the House of Delegates adjourned, and calls the General Assembly of the North Carolina Dental Society to order.

(The meeting adjourned at 1:15 a.m.)

GENERAL ASSEMBLY

The General Assembly of the North Carolina Dental Society convened on Monday night — Tuesday morning at 1:17 a.m., immediately upon adjournment of the House of Delegates, May 18-19, 1953, President of the Society Dr. A. C. Current presiding.

PRESIDENT CURRENT: I will call this session to sustain or reject what has been done in the House of Delegates.

DR. W. T. BURNS: Is a motion in order at this time?

PRESIDENT CURRENT: A motion is in order, yes, sir.

DR. BURNS: This motion has been read many times tonight. I will read it again. This motion is directed to the General Session of the North Carolina Dental Society.

PRESIDENT CURRENT: Just a moment, folks. I should like a point of information, if anyone can give it.

These ten men have appealed from the ruling of the House of Delegates. They have appealed to the General Assembly of the North Carolina Dental Society. Their appeal is to have the North Carolina Dental Society give a positive vote, whereas the House of Delegates has given a negative vote. That is the way I understand it.

DR. BURKE W. FOX: If you had adjourned the House of Delegates and called a general session for the sole purpose of referring this matter to be sustained or rejected, then you would be correct.

However, you adjourned the House of Delegates and called the General Assembly to order. And as a General Assembly any motion that pertains to the business of this Society can be submitted.

PRESIDENT CURRENT: What are you appealing to the General Assembly for, Dr. Fox?

DR. FOX: You did not specify, in calling this special meeting of the General Assembly, that it was for the special purpose of sustaining or rejecting it. And as long as they are in order on the thing, any motion is in order.

PRESIDENT CURRENT: We will let Dr. Burns read his motion.

DR. BURNS: The motion is directed to the General Assembly of the North Carolina Dental Society.

(Dr. W. T. Burns reread the motion (page 239).)

PRESIDENT CURRENT: You have heard the motion made to the General Assembly of this Society.

Is there a second?

(The motion was duly seconded.)

PRESIDENT CURRENT: Everyone who favors adopting the motion that Dr. Burns just read, will please move over to my right.

All those who wish to reject that motion, will please move over to my left.

(The members moved to their chosen places.)

PRESIDENT CURRENT: It seems that the decision speaks for itself. I announce that the motion has carried.

This meeting is adjourned.

(The meeting adjourned at 1:45 o'clock.)

Third Session

HOUSE OF DELEGATES

Wednesday, May 20, 1953

The meeting reconvened at 10:15 a.m., President of the Society Dr. A. C. Current presiding.

PRESIDENT CURRENT: I call the House of Delegates to order.

(The Secretary called the roll and declared a quorum present)

PRESIDENT CURRENT: The Secretary has quite a number of committee reports that have been handed to him. Before I call for them, I am going to ask the Secretary to announce the committee reports that he has. If he feels like submitting them by title, and if you feel like accepting them by title, it is all right.

DR. CLYDE MINGES: As a matter of information, do any of those reports contain budgetary items or recommendations of any kind?

PRESIDENT CURRENT: Some do, and some do not.

DR. MINGES: I move that we accept all reports that do not carry budgetary items or recommendations. All committee reports to come before this House are to be received by title, with the exception of those that do contain budgetary items or recommendations.

(The motion was seconded, put to a vote, and carried.)

(Secretary Walker read the following papers by title:)

REPORT OF THE LIAISON COMMITTEE TO THE
OLD NORTH STATE DENTAL SOCIETY

On February 20th, 1953 your chairman wrote Dr. M. L. Watts of Raleigh, North Carolina, who is Secretary of The Old North State Dental Association, and suggested that if we could be of any service to his organization to please let me hear from him.

To this date no reply has been received so your committee feels that everything is well with the Old North State Dental Association.

Frank W. Kirk, *Chairman*

REPORT OF THE CONSTITUTION AND BY-LAWS COMMITTEE

Your Constitution and By-Laws Committee has not been requested, nor seen fit, to recommend any changes in our present Constitution and By-Laws.

Daniel T. Carr, *Chairman*

REPORT OF THE INSURANCE COMMITTEE

The Committee on Insurance contacted Mr. Crumpton, Representative of our Group Health and Accident Insurance for this body and found the following:

That all claims have been paid up to date.

The claims paid in 1953 to dentists practicing in North Carolina total \$38,000 plus.

There have been no controversies regarding insurance with this organization.

The committee wishes to stress the advantages of this insurance policy.

We find that there are a number of men insured with this company that have failed to file claims when they are initialed to same. Mr. Crumpton urges that the claims be filed early and promptly.

T. E. Sikes, Sr., *Chairman*

REPORT OF THE ARRANGEMENTS COMMITTEE

The committee had very few tasks to perform due to the efficient and well-oiled machinery already in operation.

Flowers were procured for the Memorial Service by Dr. Ralph Coffey. Meetings were announced and the members were urged to attend.

Other minor services were performed and the committee was willing and happy to perform any duty requested of them.

DAVID ABERNETHY, *Chairman*

REPORT OF THE SUPERINTENDENT OF CLINIC COMMITTEE

The clinics this year represented almost every phase of dentistry. Four clinics were given by the Hygienists, one by the Dental Assistants of this state, twenty-five by members of the North Carolina Dental Society, and a variety of clinics were given by the dental students of the University of North Carolina.

In all there were about forty-two or forty-three persons participating in these clinics which were well attended.

S. P. GAY, *Chairman*

SECRETARY WALKER: Dr. Sam Isenhour has a resolution he wishes to have passed. This is from the Insurance Committee. This is the resolution.

INSURANCE COMMITTEE RESOLUTION

BE IT RESOLVED, That the North Carolina Dental Society be informed each year of the payments of any claims due on policies under LIABILITY INSURANCE and of the dentist involved in said claim and be it further resolved that the State Commissioner of Insurance be contacted for information as to the status of said insurance companies doing business with the members of the North Carolina Dental Society.

DR. CLYDE MINGES: Who made that report?

SECRETARY WALKER: Dr. Minges, this is from the Insurance Committee.

DR. MINGES: Who is chairman of that committee?

SECRETARY WALKER: Here is the list.

Insurance Committee:

T. E. Sikes, *Chairman*
Claude A. Adams
Herman Houck
P. P. Yates
Charles H. Teague

The Insurance Committee presented this to the Resolutions Committee, and the Resolutions Committee have endorsed it.

Resolutions Committee:

P. B. Whittington
Clyde Minges
Sam Isenhour
John Ashby
W. M. Matheson

DR. MINGES: I suspected my name was on there. I understand it is an attempt to explain this thing. I am now standing in an attempt to explain the resolution as best I can.

It seems that there are those in North Carolina who have had policies that did not pay off. At least, that is the reason given me for signing it, and I signed it. I think that is not the case. The purpose of that resolution is to bring out into the open, the cases of those insurance companies who are selling insurance and not paying off on their liabilities; those who are not paying liabilities as they are presented to them.

Is that your understanding, Dr. Walker.

SECRETARY WALKER: Yes, that is true.

There is another report, as far as the group Health and Accident Policy for this body. They report "that all claims have been paid up to date. Claims paid in 1953 to dentists practicing in North Carolina total \$38,400 plus." There have been no controversies regarding insurance with this organization. The committee wishes to stress the advantages of this insurance policy."

That is the group Health and Accident Policy.

DR. MINGES: When I was asked to sign the resolution, I understood that there were a few so-called wild-cat insurance companies taking premiums, and if a fellow got hurt or sick, they did not pay off. That is the thing I understood.

SECRETARY WALKER: That is correct, Dr. Minges.

We have had quite a bit of discussion and correspondence with the liability insurance companies. The Fifth District had quite a time down in Wilmington, where a company was withdrawing their agency, and some of these men had been under protection from this company for over fifty years. There has been the insinuation that the liability insurance companies were about to go broke.

To our knowledge, no claims have been made public. The resolution is to try to clear that up. If the insurance companies are going to pay claims and charge us accordingly then the Society should be informed of these matters. I do not believe there has been any negligence or anything out of order, as far as any of our members are concerned. The committee wants to be shown or have it proven.

DR. MINGES: I should like to make this statement for the record:

I think everybody is entirely satisfied with our present arrangement with Mr. James Crumpton. This resolution is in no way to be construed as a complaint against our company that Mr. Crumpton represents. By name, it is the Commercial Casualty Company.

SECRETARY WALKER: This is purely and simply liability.

DR. MINGES: That is right.

DR. FOX: I understood the rating of that was that a report should be made through the Insurance Committee, of all claims that were paid to date.

SECRETARY WALKER: "Be it resolved that the North Carolina Dental Society be informed each year of the payments of any claims due on policies under liability insurance, and of the dentists involved in said claims."

DR. FOX: Mr. President, that is what I want to clarify.

Actually, we have a group policy with Mr. Crumpton's company. As a group policy, the North Carolina Dental Society has a right to ask for information from them. But where a dentist buys an individual policy, that is a contract between that insurance company and the individual. You do not state in there who is to give that information to the North Carolina Dental Society — whether it is the dentist or whether it is the insurance company.

If it is a certain contract between an individual dentist and an insurance company, this North Carolina Dental Society hasn't any right to be involved. That is, we can ask it from our dentists, but it is not a group policy. I do not see how we can ask the insurance company to give us information about contracts they have.

DR. DONALD KISER: Mr. President, I did not hear anything in there pertaining to sickness and accident insurance payments.

This is "liability payments." Am I correct?

SECRETARY WALKER: Correct.

DR. KISER: What about malpractice payments?

DR. W. T. BURNS: There seems to be a lot of misunderstanding about it. My understanding is that it pertains only to liability insurance, and it pertains only to those members who have failed to receive remuneration they are entitled to. It says that plainly.

SECRETARY WALKER: This motion, to answer Dr. Fox, is as follows:

The major companies will not insure a dentist in the State of North Carolina unless that dentist is a member of the North Carolina Dental Society. Each of you, when you apply for insurance, undergoes the same procedure. Your name is sent in to the secretary, asking whether or not you are a member in good standing. As we tried to point out in the Journal, if you are in arrears in your dues after March 31 of any one year, your liability insurance will not cover you in the event of a lawsuit. This is purely and simply liability insurance. It has nothing to do with payment to the dentist. It is merely covering you for your protection for anything that might happen to any patient who is in your office.

DR. FOX: Mr. President, let us clarify that a little bit. I did not catch that liability insurance. I thought that it had to do with this other individual health and accident insurance.

I still do not know whether, unless it is a group policy, we can do this. That is not an issue, I believe, but I think you should specify it. It says, "should receive information." The thing you should specify in that resolution is from whom you should receive this information.

PRESIDENT CURRENT: Is there any other discussion?

(The resolution as read was adopted upon vote of the House.)

PRESIDENT CURRENT: It is so ordered.

Those are all the committee reports the Secretary has, containing these various items that we had to vote on.

DR. PAUL FITZGERALD, JR.: Mr. President, I have the Report of the Library and History Committee, which is very short. I should like to read this, because I haven't a copy for my own files.

This is the Report of the Library and History Committee, regarding the sale of the history books. This report was purposely delayed until this time so we could make a better showing.

HISTORY OF THE NORTH CAROLINA DENTAL SOCIETY

Books on hand May 25, 1951:	100	
Balance in bank at that time:		\$19.75
Books sold, February 25, 1953		6.00
Balance in Bank		25.75
Books sold at Pinehurst—1953	10	30.00
Commissions: Mrs. Henderson, Mrs. Longwell		3.00
Books given Complimentarily	2	
Balance, Cash on Hand		27.00
Books on hand at this time:	88	

Submitted by: Paul Fitzgerald, Jr., *Chairman*

Report adopted.

DR. J. HOMER GUION: I am reporting for the Executive Committee. I should like to submit the Report of the Executive Committee and move that it be accepted by title.

PRESIDENT CURRENT: The motion is not needed if it does not contain the two items already voted on.

If it does not contain budgetary items or recommendations, or any resolutions, Dr. Guion, it is accepted by title.

DR. CLYDE MINGES: Are there any resolutions in there, or recommendations or budgetary items or appropriations?

DR. GUION: It does have those items.

PRESIDENT CURRENT: Then you have to read at least that part of it.

DR. MINGES: Just read the budgetary items and the recommendations.

DR. GUION: It contains, as far as I know, one budgetary item.

"At our May 14, 1952 meeting at the Carolina Hotel, Dr. Fitzgerald discussed the Dental Relief Fund. He reported that two members of the Society were on relief and the prospects were that one or two more may be, before the year is over.

"Dr. Walker and Dr. Guion discussed the matter. Dr. Paul Fitzgerald, Sr. made the motion that the sum donated by the North Carolina Dental Society to the North Carolina Dental Society Relief Fund be raised from \$200 to \$500. Dr. Neal Sheffield seconded the motion, which was carried unanimously."

There is another item.

"A motion was made that the Committee for Entertainment of Out-of-State Visitors be allowed \$150 for its work. This motion was duly seconded and passed."

Suggestions were made regarding the Public Relations and Fluoridations Committee, and the need for its continued good work and the leadership of Dr. Brauer. Dr. Walker made the motion that this committee be given an appropriation not to exceed \$200, to be used as the committee deemed necessary to carry out that program. Dr. Neal Sheffield seconded the motion, which was passed.

Dr. Paul Fitzgerald, Sr. discussed the Dental Relief Fund, the members who are on relief, and the prospects of others being in need of help. He moved that the Executive Committee donate another \$500 for the Dental Relief Fund, making a total of \$1000 for 1952. The matter was discussed by Drs. Walker, Current, and Moser. The motion was seconded by Dr. Ira R. Self, Sr., and passed. Dr. Bernard Walker asked the members of the Executive Committee to agree that this sum would not be

drawn from the bank account until the Chairman of the Dental Relief Committee notified the Secretary that he had deposited sums to the Dental Relief Fund. We never needed that fund, so it was not deposited.

(Secretary Walker read the following papers by title:)

REPORT OF THE GOLF COMMITTEE

The Golf Tournament was played Sunday afternoon, May 17, over the Pinehurst Country Club Courses, with 97 contestant competing for prizes.

We, the committee are indebted to the dental supply houses and the dental laboratories for their fine support.

The following firms donated prizes:

Thompson Dental Supply Co.	Trophy
Powers and Anderson Dental Co.	Golf Umbrella
Carolina Dental Supply Co.	Putter
Keener Dental Co.	Trophy
Walker-Sizer Dental Co.	Set of Club Covers
Harris Dental Co.	Dental Emblem
Charlotte Laboratory	2 Shag Bags
Woodward Prosthetic Co.	Trophy
Buran Dental Laboratory	Casting Reel
Central Dental Laboratory	3 Golf Balls
City Dental Laboratory	Set of Club Covers
Eure Dental Laboratory	12 Golf Balls
Fleming Dental Laboratory	12 Golf Balls
Greensboro Dental Laboratory	Merchandise
Sullivan Dental Laboratory	3 Golf Balls

W. H. Breeland, *Chairman*

REPORT OF THE STATE INSTITUTIONS COMMITTEE

It appears to the committee that quite satisfactory dental services are being provided at our state institutions, and that staffs and facilities are being expanded as conditions permit. It is worthy of note that the dental clinic at State Hospital in Raleigh will be housed in modern quarters upon completion of a new building now under construction.

O. L. Presnell, *Chairman*

REPORT OF THE CLINIC BOARD OF CENSORS

The following table clinics were selected by your committee to appear on the program of the American Dental Association this fall in Cleveland, Ohio.

1. "Modern Concepts in the Treatment of Root Canals"
Dr. John R. Pharr, Charlotte
2. "Aids in Children's Dentistry"
Dr. Francis C. Slaughter, Kannapolis
3. "Jacket Preparations"
Dr. A. C. Current, Jr., Gastonia
Dr. Claibourne Poindexter, Greensboro
4. "Newer Approach to Centric and Vertical Relation"
Dr. J. G. Crowell, Hendersonville
Mr. Jimmie Taylor, Technician, Hendersonville

5. "Practical Technique for Vital Pulpotomy on Primary and Young Permanent Teeth"

Dr. Joseph F. Burket, Chapel Hill

6. "Drugs in Oral Surgery"

Dr. Charles D. Eatmon, Rocky Mount

RALPH F. JARRETT, *Chairman*

REPORT OF THE ADVISORY COMMITTEE TO THE DENTAL HYGIENISTS' ASSOCIATION

The Dental Hygienists' Association wishes to report the following.

The number of licensed dental hygienists in the state of North Carolina is inadequate to meet the present demand.

That courses for dental hygienists at the University of North Carolina will start the fall of 1953. Sixteen students have been accepted to the first class.

Constitution and By-Laws for the North Carolina Dental Hygienists' Association has been rewritten to conform with the By-Laws of the national body. These were submitted to the national association and approved by the governing body.

The Association has increased its membership from 14 to 20.

A pamphlet to interest high school students in this profession will be completed in the near future.

Plans are being made to publish a quarterly bulletin which would be sent to all NCDHA members and to the presidents of each state association.

AMOS BUMGARDNER, *Chairman*

DENTAL ADVISORY COMMITTEE FOR THE VETERANS ADMINISTRATION

The committee acting in an advisory capacity to the Veterans Administration considered two cases the past year. In one case, the committee recommended the dentist be required to refund the fee paid to him by the Veterans Administration and to discontinue him as a participating dentist in the Veterans Administration Program. In the second case, due to circumstances and the willingness of the dentist to make a correction, the committee recommended that additional authorized work be withheld by the Veterans Administration until the case in question had been settled.

On July 10, 1952 a meeting was called in Winston-Salem. Invitations were extended to the President and Secretary of the state society, Presidents of the districts and the Consulting Staff of the Veterans Administration. In attendance were Drs. Brauer, Hall, Walker, Blair, Spoon, and Weeks.

Minutes of the meeting and the recommendations that were made are attached.

The committee, in effort to serve the individual dentist, recommended that each district president appoint a sub-committee made up of the local society members to work with their respective Advisory Committee Member. Two of the districts established such a group.

RILEY SPOON, *Chairman*

Minutes of July 10, 1952 Meeting

Dr. Weeks of the Veterans Administration stated that 681 North Carolina dentists, not necessarily members of the North Carolina Dental Society, are approved to participate in the veterans' program. Of this number, 672 dentists actively participated last year. Approximately $\frac{3}{4}$ million dollars was paid by the Veterans Administration for the services rendered by these 672 dentists.

Other discussion centered about the number of veterans in our state. It is estimated there are one-half million veterans in North Carolina. At present approximately 2000 Korean War veterans in this state are being discharged monthly. Thus, the total number continues to increase.

With this potential increase in demand for dental services always present and the number of veterans increasing, it is apparent that as a recession occurs the demand for service will be overwhelming. Approximately 15% of the North Carolina veterans have made application for dental care.

Congress through legislature has provided many benefits for the veterans. Enormous expenditures are made not only for dental care but medical, educational, and housing programs. Therefore, it seems unlikely that such benefits will decrease as the total veteran *vote* grows continuously.

The problems of such a program are inherent and involve more than 80% of our members of the North Carolina Dental Society. It seems that if our profession is to have a voice in such a program, now is the time to be heard. The act of participating in such a program registers our acceptance. If we are to accept the program, we should strive to assist in its future development.

At present many areas of our state lack sufficient professional personnel to maintain adequate dental health. In the case of an economic recession, just what percent of the veterans would then apply for dental treatment under the veterans' program?

Of equal importance to our profession was the discussion of cases where irregularities had been found and in some instances where there was an indication of fraud and unethical practices on the part of a few participating dentists. We are fortunate to have a Chief, Dental Service, in this regional office who has had considerable experience in civilian practice and who understands dental problems. He has cooperated with the Advisory Committee in assisting and adjusting those cases to the satisfaction of all concerned.

Our committee should somehow instigate a program to prevent such cases in the interest of our profession and public relations. Therefore, to familiarize our members with the Veterans Administration's policies and to aid them in their problems peculiar to their locations, sub-committees must be established.

It is hoped these committees will be established prior to the fall district meetings. This would facilitate an open forum or table clinic for each district program.

REPORT OF THE MEMBERSHIP COMMITTEE

	Districts				
	1	2	3	4	5
Members in good standing	153	203	149	130	147
Members subject to suspension	9	6	18	2	1
Members re-instated	4	None	6	1	1
New members	6	9	21	8	6
In Military Service	12	No	5	5	4
	report				
Total members	844				
Total subject to suspension	36				
Total re-instated	12				
Total new members	50				

Neal Sheffield, *Chairman*

REPORT OF THE HOSPITAL DENTAL SERVICE COMMITTEE

Your committee has not had too much to do this past year. We did have several requests from hospitals regarding Dental Internship, all help possible was given.

The American Dental Association council on Hospital Dental Service whose Chairman is Dr. Frank B. Hower of Louisville, Ky., has set up a new basic standard of Hospital Service. I have two copies and will turn them over to the Secretary-Treasurer for future guidance of the new committee.

Coyte R. Minges, *Chairman*

REPORT OF THE RELIEF COMMITTEE

The Relief Committee has met twice during the year, Jan. 4 in Raleigh and April 27, at Chapel Hill.

Following is a financial statement covering the period of June 17, 1952 to April 30, 1953. This report shows that expenditures are in excess of receipts by approximately one hundred dollars.

We wish to express our thanks to the membership and especially to the North Carolina Dental Auxiliary for their efforts in behalf of the Relief Fund.

NORTH CAROLINA DENTAL SOCIETY RELIEF FUND

Cash Receipts and Disbursements
June 17, 1952 to April 30, 1953

Balance Brought Forward June 17, 1952	\$1,527.61
Receipts:	
ADA Christmas Seals	628.06
Scrap Metal	223.04
Total Receipts	\$2,378.71
Total Disbursements	\$945.00
Bank Balance May 1, 1953	\$1,433.71
Bonds	898.50
Net Worth	\$2,332.21

PAUL FITZGERALD, SR., *Chairman*

SECRETARY WALKER: I have a point for clarification.

Being on the Executive Committee, and seeing the expenditures that

are going out to the Dental Relief Committee, and since there have been applications that are turned in to the Dental Relief Committee which I, as Secretary-Treasurer have to sign before they go to the American Dental Association, I think it is time that the House of Delegates of the North Carolina Dental Society make and set up a policy, whereby the Dental Relief Committee will have some rule to go by.

I have not yet been able to find out whether or not this Dental Relief Fund is a dental retirement fund, or whether it is for emergencies. In considering some applications that are coming in for dental relief, it looks like it is turning out to be a dental retirement fund. I want to mention the balance of \$1433. We are expending more out of the Dental Relief Fund than is coming in, unless the Society continues to raise its appropriations to the Dental Relief Fund.

Mr. President, I think there should be some discussion as to just whether or not this is going to turn out to be a dental retirement fund, or a dental relief fund, and what constitutes "relief".

I ask that as a question.

PRESIDENT CURRENT: The Secretary has asked a question. What constitutes dental relief? He has raised this point for some discussion here.

Is there a member who wishes to discuss it?

DR. PAUL FITZGERALD, SR.: Mr. President, we have two recipients of aid, who are members of the North Carolina Dental Society.

These men have been in good circumstances. Old age has overtaken them. The unfortunate phases of life have overtaken them. For one, I would be willing to continue our present recipients. I do not at any time favor making of this a retirement fund, but where a man is unable to work and has paid his dues over a period of years, or even if it has been for only a few years, is unable to work and does not have those financial assets where he can live at all comfortably, I am in favor of extending this aid.

I think, Mr. President and gentlemen, that is what our revenue fund was set up for, and not to deny aid to any member who cannot work and has nothing to subsist on.

DR. CLYDE MINGES: Mr. President, I hesitate to rise, but I feel perhaps I should say just one word.

During a period in my life I served on the Interim Committee of the American Dental Association, for six years. It was the duty of that committee to scrutinize and sign all applications presented throughout the United States. In doing that, I found that, of course, the national fund participates with our local fund, I think to about half the total amount. I found that we, in North Carolina, were more stringent, more rigidly screening out applicants, than any other state of the forty-eight.

It is my thought that we certainly, up to now, have not abused or distorted the fund into anything other than a relief fund, purely and simply. I do not think it is in any way, certainly not in North Carolina, being used as a retirement fund. I would be very reluctant to accept anything that would cause the very able Dr. Fitzgerald and Dr. Fleming, difficulty. I do not recall the other members of this committee, but I would not want to restrict any of them further in their screening of applicants. As I said, we have the most severe screening that any relief applicant in the United States has to undergo. That is what is being suffered right here in North Carolina.

PRESIDENT CURRENT: Is there any other discussion?

Are you satisfied, Secretary Walker?

SECRETARY WALKER: Yes, sir. I just wanted to clarify that point.

DR. Z. L. EDWARDS: By request of the chairman, I wish to present the Report of the Committee on the Presidential Address.

REPORT ON THE PRESIDENT'S ADDRESS

Your committee wishes to commend President Current for a very scholarly and thought provoking message. An address of this import required much time and talent to choose such choice bits of good counsel, poetry and philosophy.

We commend to you most heartily the president's vigorous challenge to unity and industry in the ranks of North Carolina dentistry.

As to recommendations of President Current, your committee approves adoption of recommendation one, two, three and four and recommends further study on five.

On the whole the address was a masterpiece and we congratulate the president on it.

Walter E. Clark, *Chairman*

DR. EDWARDS: Mr. Chairman, I move the adoption of this report.

(The motion was seconded, put to a vote and carried.)

PRESIDENT CURRENT: It is adopted.

DR. Z. L. EDWARDS: Gentlemen, I have another matter to bring to your attention, by request.

I wish to call to your attention, first, the fact that a few months ago we had dedicatory exercises at the Dental School over at Chapel Hill, at which time there was unveiled a plaque in honor and in memory of our departed friend, Henry O. Lineberger. State Senator Paul Jones was supposed to deliver the dedicatory address at the unveiling of this plaque, but owing to official duties in the North Carolina General Assembly he sent his address over to Chapel Hill. It was read by the President of the North Carolina Dental Society.

It was considered so good and so appropriate by all who heard it, that a request has been made that the House of Delegates be requested to approve the publication of it in the PROCEEDINGS of the North Carolina Dental Society. (See page 471.)

Mr. President, I so move.

DR. CLYDE MINGES: I second it.

(The motion was put to a vote and carried.)

PRESIDENT CURRENT: We now have a report from the Entertainment Committee.

REPORT OF THE ENTERTAINMENT COMMITTEE

The members of the Entertainment Committee wish to express deep appreciation to the preceding chairman of this committee, Dr. Royster Chamblee, for his assistance and suggestions; to the President, Dr. A. C. Current; the Toastmaster, Dr. Amos S. Bumgardner; and the management of the Carolina Hotel for their cooperation in executing the program.

We express deep gratitude to Dr. Dale Arthur, Mrs. Darden Eure, Dr. W. F. Yelton, Dr. John Pharr, and Dr. Ralph Jarrett for their participation on the banquet program.

We are indebted to the Liggett and Myers Tobacco Company, through its representative, Mr. F. P. Duncan, for the favors of the Chesterfield cigarettes.

It was gratifying to have the appearance of the "Gay Nineties" of Charlotte so well received.

In securing the speaker, Mr. Charles Raper Jonas, Representative of the Tenth Congressional District of North Carolina, your committee brought you an up-to-date report from Washington.

As you all know, this entertainment program could not have been possible without the able guidance and assistance of Mrs. Ross.

The following is a partial financial report:

Orchestra—Woody Hayes, Raleigh	\$140.00
Gift of Silver—Honor Guest	60.88
Place Cards	1.81
Favors	60.00
Shepherd Brothers—Programs	42.10
Flowers for table	20.60
Corsages	10.30
Tips	12.00
Gay Nineties	160.00
TOTAL	\$507.69

GRADY ROSS, Chairman

PRESIDENT CURRENT: The Chairman must make this one statement with respect to all these things you have heard read expressing the extreme gratitude for the excellent work you have done.

Do I hear a motion for its adoption?

Report adopted.

SECRETARY WALKER: Mr. President, I have a report here from Dr. Cary T. Wells, Chairman of the Exhibit Committee. He had to return to Canton last night.

He has a list of expenses here, which merely deals with the price. Dr. Cary Wells has done an excellent job this year. Before the meeting he sold \$3325, and there are two or three checks for \$75. We haven't the exact figures that have come in since. So it will be over \$3500, the largest by far that has been sold at any convention in the past.

Of course, all of this will be in the PROCEEDINGS, after the audit is made by Mr. Rice who has been auditing the books for a good many years. I should like to make the motion that Dr. Wells be commended on the excellent work he has done.

DR. CLYDE MINGES: I support that motion.

(The motion was put to a vote and carried.)

DR. FRANKLIN BUMGARDNER: Mr. President, Members of the House of Delegates: I have the "Report of the Clinic Committee."

PRESIDENT CURRENT: I do not believe that report contains any budgetary items or recommendations or resolutions.

DR. FRANKLIN BUMGARDNER: No, sir, it does not.

PRESIDENT CURRENT: Then it is adopted by title as previously indicated.

REPORT OF THE CLINIC COMMITTEE

The Clinic Committee wishes to thank each person who participated in bringing to us the many useful ideas expressed in the table clinics. Much work was evidenced by the fine demonstrations that were displayed. These represent the students of our profession from which come our inspirations.

The Dental Assistants were scheduled to present a clinic, but due to inadequate provision for space this was omitted. This is regrettable and we apologize.

FRANKLIN BUMGARDNER, *Chairman*

PRESIDENT CURRENT: Are there any other committee reports?

DR. FRED HUNT: A few moments ago in the Executive Committee's report, it was stated that the Public Relations and Fluoridation Committee was appropriated a sum of \$200.

In order that it might appear in the PROCEEDINGS, I should like for the Secretary to inform us as to the exact amount used by the committee.

PRESIDENT CURRENT: What do you mean by the exact amount used?

DR. HUNT: Was all of it used, or just a part?

SECRETARY WALKER: I believe it was all used, Fred, but I do not have any figures here.

DR. HUNT: Will it be in the PROCEEDINGS?

SECRETARY WALKER: Yes, of course it will be in the audit, and the audit is always published in the PROCEEDINGS. The audit of the Secretary's books and the amount paid to the chairman for that, will be in the PROCEEDINGS. I do not have those records here with me now.

DR. HUNT: I thought if you had the figures on hand you would give them to us.

SECRETARY WALKER: I do not have Dr. Brauer's report. However it will appear in the PROCEEDINGS.

DR. ROYSTER CHAMBLEE: Mr. Secretary, Members of the House of Delegates: I move that the House of Delegates goes on record as approving and concurring in the resolution as presented by Dr. J. B. Todd.

The Resolution is:

BE IT RESOLVED, That the North Carolina Dental Society endorse as a candidate for the office of President-Elect of the American Dental Association, Dr. James E. John of Roanoke, Virginia.

(The motion was seconded, put to a vote and carried.)

DISTRICT OFFICERS BREAKFAST CONFERENCE REPORT

A motion was made that members of the District Officers' Breakfast Conference recommend to the House of Delegates of the North Carolina Dental Society, that in the event of the death of a member, the State Society make a memorial gift, in the name of the deceased member, to the North Carolina Dental Foundation, Inc.

Walter Finch, *Secretary*

DR. THOMAS L. BLAIR: I call to your attention that the donations will be in lieu of flowers.

I move the adoption of this report.

(The motion was duly seconded.)

DR. WALTER H. FINCH, JR.: I think the Secretary might like to have the amount of such memorial gift stipulated. Might I say that nothing was mentioned as to the amount to be given.

DR. R. FRED HUNT: Mr. President, our policy is to send a floral design costing approximately \$10. I ask the chairman if by "in lieu of flowers" he meant possibly a \$10 donation to the Foundation?

If I am endorsing \$100 as a donation to the Foundation, that is entirely a different thing. By "in lieu of flowers" I think that should be \$5 or \$10 or some such thing. I think that definitely should be straightened out.

PRESIDENT CURRENT: It does seem, if the Chair is allowed to make an observation, that the essence of this move is for the person making the contribution to use his own judgment. Is that right?

DR. FINCH: No, sir. It says the Secretary of the North Carolina Dental Society is to make a memorial gift.

PRESIDENT CURRENT: Let us have the whole thing read again.

(Dr. Thomas L. Blair reread the "Report of the Breakfast Conference.")

DR. HUNT: You said the State Society. It was my idea it would be in lieu of flowers and would be the same amount we would put into a design. Is that correct?

DR. BLAIR: Yes, that's right.

PRESIDENT CURRENT: The Chair will make this statement:

In the case of the death of a member of this Society, the Secretary is authorized, if this is passed, to send a check to the Dental Foundation that is comparable to the amount that would be ordinarily used to send flowers to this deceased brother.

DR. FINCH: That's right.

PRESIDENT CURRENT: Has the Chair stated this correctly gentlemen?

DR. S. B. TOWLER: I think we should have the districts doing the same thing. It should read, I think, "the State and the districts."

DR. BURKE W. FOX: As a matter of fact, the House of Delegates does not have jurisdiction over that particular matter. The question has come up in the North Carolina Dental Society a number of times. Under the Constitution and By-Laws of our Society, the House of Delegates has no authority to make any appropriation.

They can recommend that an appropriation be made, to the Executive Committee, but the Executive Committee is the sole body in this organization which can make an appropriation. So we cannot vote an appropriation for flowers, or vote an appropriation to the Dental Relief Fund. We can recommend that the Executive Committee make such appropriation. But they are the only ones who can make the appropriations.

DR. COYTE MINGES: They are the ones who are recommending it.

DR. BLAIR: This is only a recommendation in lieu of the flowers that have already been recommended by the Executive Committee.

PRESIDENT CURRENT: As I understand it, and as it has already been explained, this is merely a recommendation that the resolution already adopted be concurred in.

Let us vote on this.

(The motion was put to a vote and carried.)

PRESIDENT CURRENT: It is adopted, and so ordered.

Are there other reports?

DR. PAUL FITZGERALD, JR.: I have one question which I should like to ask in this connection: it has to do with a report previously given regarding liability insurance.

This is not an attempt to reopen that question, but to ask if a certain loophole has been covered. This regards the possibility of a young man entering practice, we will say in July when the results of the Boards are known, and possibly because of the fact that he cannot be introduced properly for membership until his district meets in the fall, he would, therefore, be uncovered if membership is a requirement, until his district meets.

Is that correct, Dr. Walker?

SECRETARY WALKER: You are absolutely correct. However, that has been covered, in this respect:

If the young man has made application to his district secretary, we inform the district in which he is living or practicing, and we write to the insurance company. We tell them that he has made application, that he can only be voted on at the district meeting, and we have no reason to believe that he will not be accepted.

DR. FITZGERALD: I assume, then, that the same would apply to a man who had just left school, gone directly into the military services, and returned at an odd time of the year, such as in the summer. Would the same rulings apply, then, to him, as would apply to a new graduate?

SECRETARY WALKER: We have that same type of case. We have two of them in Charlotte at the present time.

DR. NORMAN ROSS: I should like to ask Dr. Walker if he has the Report of the Constitution and By-Laws Committee, submitted by Dr. Daniel T. Carr.

PRESIDENT CURRENT: Will you answer that question, Dr. Walker?

DR. ROSS: While he is looking for that, I know that Dr. Daniel Carr intended to bring up before the House of Delegates the question of young men just recently passed by the State Board of Examiners, who would have to wait several months to be approved at a district meeting.

I want to ask the approval of this group that such a man be taken in at the executive discretion of his district, instead of awaiting that long period.

SECRETARY WALKER: I should like to add a word to that.

I think that is an excellent idea, because we are having so many men now returning from service, who have not had time, some of them having been in Korea or Germany or overseas. They return in January or February. They have been out of contact all this time. They were formerly American Dental Association Junior members. Some of them, not knowing to which state they are going, to practice, when they return to practice, send communications to us. Invariably we receive communications from them wanting to join our Society.

Of course, each time we have to tell them that they cannot become a member of the North Carolina Dental Society until after the district votes on them. As you know, they automatically become members of the state Society when their district society accepts them as a member. I certainly think it would be a good thing if the executive committees of the various districts had the authority to admit members, under certain circumstances such as these that we have mentioned, before their annual fall meetings.

PRESIDENT CURRENT: Is there a motion before the House? Dr. Ross, did you make a motion?

DR. ROSS: No, but I would be glad to, sir. I want to make it known that this pertains to new members, to avoid controversy with old members trying to re-enter.

I should like to stress that this is only for new members, recent graduates. I should like to make such a motion, Mr. President.

PRESIDENT CURRENT: I would be glad to entertain it.

DR. ROSS: I move that the House of Delegates would allow the executive committees of the various districts to approve — you can put the word “tentatively” in there, if it would be wise—at their discretion, rather than waiting for the annual district meetings for approval by the full membership, giving them all rights under the state, to American Dental Association membership.

PRESIDENT CURRENT: Dr. Ross, would that apply to new members only?

DR. ROSS: Yes, sir.

PRESIDENT CURRENT: The motion now before the House is that the various district Executive Committees be permitted to tentatively accept for membership in this Society all new members. That is at the discretion of the district Executive Committees, who would accept their applications immediately, rather than waiting until the annual meeting of the Society.

Is that correctly stated, Dr. Ross?

DR. ROSS: Yes.

DR. BURKE W. FOX: I will second it.

Mr. President, the Constitution and By-Laws provide for no means of a man being elected directly to the North Carolina Dental Society. It is expressly stated that he is a member of the district dental society, in order to be eligible for state membership. That is in line with what Norman is saying.

I am heartily in sympathy with what Norman Ross is bringing out here, but this would have to involve a change in the Constitution and By-Laws of the districts.

I should like to see Norman change his motion and make it that a committee be appointed to recommend the necessary changes in the By-Laws to the various districts, so that this can be taken care of. We can draw up a standard change form in the Constitution and By-Laws. This committee could draw that up and submit it to the districts so that they could adopt it. I am well in favor of the motion, but we cannot do it here. There has to be a change in the district by-laws.

DR. ROSS: I should like to ask Dr. Walker if there is anything in the Constitution and By-Laws Committee resolution that has that change.

SECRETARY WALKER: Your Constitution and By-Laws Committee has not seen fit to recommend or make any changes in our By-Laws.

DR. ROSS: I do not believe that would affect the Constitution and By-Laws in any way.

As Dr. Fox pointed out, I would hesitate to speak in his name, but I know that he is in favor of this. However, it would not change the question. You would still have to change the procedures.

PRESIDENT CURRENT: The motion Dr. Ross made is being questioned on its constitutionality. Is that right?

DR. FOX: Mr. President, I believe I cannot make a motion because I am not a delegate, but I should like to recommend that a substitute motion for this be made, that the Constitution and By-Laws Committee draw up a standard change and recommend it to the various districts, to permit the men to be elected to membership at other times than at annual meetings.

PRESIDENT CURRENT: The Chair would be glad to entertain such motion.

DR. RALPH JARRETT: Mr. Chairman, I should like to make a motion that would be what Dr. Burke Fox has just stated.

PRESIDENT CURRENT: We have a substitute motion now. It is, in substance, that the Constitution and By-Laws Committees of the various districts — —

DR. FOX (Interposing): No, No. That the State Society draw up a standard form and recommend it to the districts.

PRESIDENT CURRENT: The motion is that the State Constitution and By-Laws Committee draw up a recommendation and present it to the district societies.

Is that the motion you want to make, Dr. Jarrett?

DR. JARRETT: Yes.

(The motion was duly seconded.)

DR. Z L. EDWARDS: I don't know how far this thing will extend. We do not want to invade the rights or the prerogatives of the district societies. The district societies are thoroughly capable and competent of amending their own Constitutions and By-Laws.

I do not think the parent organization has any authority to prepare a model Constitution and By-Laws provision and send it down to the districts for their consideration. As a matter of fact, Mr. President, I am inclined to think that they would tell you they are capable of doing it themselves. However, I do feel that the district societies would appreciate and entertain any suggestions that this organization has to make with reference to such changes.

It appears to me, therefore, that the diplomatic thing to do, the advisable thing to do, would be that this organization take notice of the need for such changes. Then that they communicate these needs and suggestions to the district societies for their consideration.

DR. FOX: Mr. President, on my original motion — —

PRESIDENT CURRENT (Interposing): I do not believe you made an original motion. I believe you recommended that somebody else make it.

DR. FOX: I beg your pardon. What I meant was that Dr. Jarrett made a motion to be placed before this House. That motion was that the Constitution and By-Laws Committee of the North Carolina Dental Society draw up a standard change in the by-laws and recommend it to the various district societies. Such standard form was to permit the election of members to the district societies at times other than at annual meetings.

Now, that was a recommendation. Now, the only point I have there is that I do not think Dr. Edwards would object to that. I think the membership should be the same in all districts, and I think the districts would appreciate having something drawn up so that they can consider it and each district can consider it and get the same thing, instead of having it one way in one district and another way in another district.

PRESIDENT CURRENT: That motion was made by Dr. Ralph Jarrett. Dr. Riley Spoon seconded it. It is now open for formal discussion.

DR. ROSS: My only thought in presenting this at this time is to prevent any longer delay than is necessary.

I should like to hear the parliamentarians tell us the quickest way to accomplish this change, if such is the desire of the group. I should like to avoid another year's delay. Can anyone say what is the fastest method by which this can be done? Does it have to be presented to this group next year, and then at a later year? Can the districts do something at their next annual meetings which will make this an accomplished fact the following year?

PRESIDENT CURRENT: There is a motion before the House. I tried to restate it, as accurately as I could. I will do it again, and I want you to get it:

That the Constitution and By-Laws Committee of the North Carolina Dental Society draw up something that would tentatively appear to be a standard for accepting members into the district societies at times other than at annual meetings, and present that just for the consideration of the district societies.

(The question was called for.)

(The motion was put to a vote and carried.)

PRESIDENT CURRENT: It is adopted.

Are there other committee reports?

Is there any unfinished business or old business to come before this House of Delegates? (No response.) Is there new business to come before this House of Delegates? (No response.) Is there any new business? (No response.)

If not, the Chair entertains a motion to adjourn this administration's House of Delegates.

DR. PAUL FITZGERALD, SR.: I so move its adjournment.

DR. COYTE MINGES: I second it.

PRESIDENT CURRENT: It is so ordered.

We will have a three-minute recess, at which time the final meeting of the Ninety-Seventh Anniversary Meeting in General Session will be called.

(The meeting adjourned at 11:25 a.m. o'clock.)

REPORT OF THE SECRETARY-TREASURER

2205 St. Mary's Street
Raleigh, North Carolina
June 27, 1953

To the Officers and Directors
North Carolina Dental Society
Charlotte, North Carolina

Gentlemen:

I have examined the books and vouchers of the North Carolina Dental Society for the fiscal year ended May 31, 1953, and submit, herewith, my report comprising the following statements, together with my comments thereon:

EXHIBIT A BALANCE SHEET

EXHIBIT B STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS

Schedule 1 Bank Reconciliation

Schedule 2 1953 Meeting Expense

Cash in bank was confirmed by the depository, as was the presence of the bonds held for safekeeping. Receipts were traced into the bank account, and cancelled checks and paid bills were inspected and found to be in order.

Membership records and unpaid bills were not submitted for my examination. Consequently, members' arrears and liabilities, if any, are omitted from the Balance Sheet—Exhibit A.

I have examined the records of the North Carolina Dental Relief Fund for the fiscal year ended May 31, 1953. A statement of the cash transactions follows:

Receipts:

A.D.A. Share Christmas Seal Receipts	\$ 628.06
Sale of Scrap	223.04
Old Outstanding Checks written back	52.50
	<hr/>
	903.60

Disbursements:

A.D.A. Special Relief Fund	1,155.00
Net Decrease	251.40
Bank Balance—June 1, 1952	1,475.11
	<hr/>
Bank Balance—May 31, 1953	\$ 1,223.71

The assets of the fund at May 31, 1953 were as follows, there being no record of any liabilities or outstanding checks:

Cash on Deposit	\$ 1,223.71
U. S. Treasury Bonds—Series F	
Maturity \$12,025.00—at cost	8,898.50
Total	\$10,122.21

Cash on deposit was verified directly with the depository, as was the presence of the bonds held for safekeeping.

Respectfully submitted,
H. H. RICE, C. P. A.

Exhibit A

BALANCE SHEET

May 31, 1951

Assets

Cash on Deposit—Schedule 1	\$ 6,457.26
U. S. Treasury Bonds—Series F—	
Maturity \$12,500.00—at Cost	9,250.00
Total Assets	\$15,707.26
Net Worth—General Fund	\$15,707.26

Exhibit B

STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS

Fiscal Year ended May 31, 1953

Bank Balance—June 1, 1952	\$ 4,233.40
<i>Receipts:</i>	

Membership Dues:

	<i>Active</i>	<i>Life</i>	<i>Total</i>
District #1	\$ 4,277.00	\$ 240.00	\$ 4,517.00
2	5,400.00	880.00	6,280.00
3	4,412.00	580.00	4,992.00
4	3,130.00	620.00	3,750.00
5	3,116.00	720.00	3,836.00
	<u>\$20,335.00</u>	<u>\$ 3,040.00</u>	<u>\$23,375.00</u>

Relief Contributions to American Dental Association:

District #1	\$ 161.00	
2	230.00	
3	187.00	
4	149.00	
5	147.00	874.00

Sale of Exhibit Space—

1953 Meeting	3,575.00
Sale of Directory	5.00

Subscriptions to A.D.A. Journal	20.00	
Miscellaneous Refunds	87.75	
		<hr/>
Total Receipts		27,936.75
		<hr/>
Total Receipts and Balance		\$32,170.15

Exhibit B

STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS

Fiscal Year ended May 31, 1953

Disbursements:

American Dental Association—Share of Membership Dues:

Active	\$13,620.00	
Life	3,040.00	
Relief Contribution	874.00	\$17,534.00

Refunds to Members	34.00	
Subscriptions to A.D.A. Journal	20.00	17,588.00

Expenses:

Salary—Editor and Publisher	500.00	
Salary—Secretary-Treasurer	250.00	
Salary—District Secretaries	125.00	
Printing Proceedings—		
1952 Meeting	2,649.00	
Reporting Service—		
1952 Meeting	376.54	
Committee Expense	100.00	
Auditing	80.00	
Postage	94.68	
Stationery, Printing and		
Office Expense	260.00	
Bond Premiums	19.50	
Flowers	31.75	
1953 Meeting Expense—		
Schedule 2	3,638.42	8,124.89

Total Disbursements		<hr/>	25,712.89
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Bank Balance—Exhibit A			<hr/>	\$ 6,457.26
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Schedule 1

BANK RECONCILIATION—GENERAL FUND

May 31, 1953

The Commercial National Bank—Charlotte, N. C.

Balance—Exhibit B			\$ 6,457.26
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Add: Outstanding Checks:

#462	Hon. Chas. P. Jonas	\$ 100.00	
464	A.D.A. Remittance Report #132	100.00	
465	A.D.A. Relief Fund Report #132	5.00	
466	Shepard Decorating Co.	405.00	
467	R. W. Madry	188.85	
468	Hemmers Photo Shop	90.50	889.35

Balance per Bank Statement	\$ 7,346.61
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Schedule 2

1953 MEETING EXPENSE

Fiscal Year ended May 31, 1953

Dr. Marvin Chapin	Honorarium	\$ 50.00
Dr. Harrison M. Berry	Honorarium	206.00
Dr. J. E. John	Honorarium	25.00
Dr. Thaddeus A. Cheatham	Honorarium	10.00
Dr. J. F. Volker	Honorarium	207.55
Hon. Charles P. Jonas	Honorarium	100.00
Carolina Hotel	Accommodations	911.15
Mrs. Vallis Henderson	Registration	50.00
Mrs. O. E. Longwell	Registration	50.00
Southern Bell Tel. & Tel. Co.	Committee Expense	12.18
Pound and Moore Co.	Committee Expense	60.08
Dr. Cary T. Wells, Sr.	Committee Expense	397.51
Dr. Tom Blair	Committee Expense	105.00
Dr. Grady Ross	Committee Expense	12.00
Shepard Decorating Co.	Decorations	405.00
Gay Ninety Quartette	Music	160.00
Woody Hayes Orchestra	Music	140.00
Fowler Office Supply	Use of Typewriter	5.00
Hemmer's Photo Shop	Photography	90.50
Economy Printing Co.	Cards	36.80
Addressing Service	Cards	46.38
Shepherd Bros., Inc.	Programs	42.10
Bastian Bros. Co.	Badges	108.35
Caro. Drug Store	Candy	60.00
R. W. Madry	Publicity	188.85
Garibaldi and Bruns, Inc.	Engraving	2.16
Dr. Paul Jones	Transportation	4.50
Gouger and Yeno Electric Shop	Refund Exhibit Space	75.00
Novocal Chemical Mfg. Co.	Refund Exhibit Space	75.00
Mrs. Grady Ross	Refund Place Cards	1.81

Total—Exhibit B

\$3,638.42



The Currents.—Left to right are son Dr. A. C., Jr., President Eddy, Mrs. Current and pre-dental student son Bill.

OPENING SESSION

Sunday, May 17, 1953

The Ninety-Seventh Anniversary Meeting of the North Carolina Dental Society was called to order at the Carolina Hotel, Pinehurst, North Carolina, Sunday evening, May 17, 1953, at 8:30 o'clock p.m., Dr. A. C. Current, President of the Society presiding.

PRESIDENT CURRENT: The Ninety-Seventh Anniversary Meeting of the North Carolina Dental Society will come to order.

We shall stand while Dr. Thaddeus A. Cheatham, Pastor, the Village Chapel, Pinehurst, N. C., brings us the invocation.

Let us stand.

THE REV. DR. CHEATHAM: O God, our Heavenly Father, we are met here in convention to consider the affairs of a very important and vital profession.

We wish to put our work upon the very highest principles of integrity, honesty, and service to our State and Nation. Because we look to Thee as the inspiration of every good and worthy thing that we do, we ask Thee to come and direct all the proceedings of this convention so that our work can be planned for the highest standards. Be with us as we meet together. Direct us in all of our doings to Thy most gracious favor in furtherance of our continued work. We ask this in the name of Jesus Christ, our blessed Lord and Saviour. Amen.

PRESIDENT CURRENT: We thank you, Dr. Cheatham.

Dr. Cheatham has just explained that he has another engagement and will have to retire. We are sorry to lose him, but in that event, we will allow him to go.

The Address of Welcome by Mr. Richard S. Tufts, President of Pinehurst, Inc., is next on our program.

Dr. Royster Chamblee will speak at this time.

DR. ROYSTER CHAMBLEE: Mr. President, Members of the North Carolina Dental Society, and Guests: The correspondence that I have here will explain the absence of Mr. Richard Tufts, who was supposed to be with us tonight. I shall read the correspondence that Dr. S. E. Moser had with Mr. Tufts. It will, as I say, explain his absence.

(Dr. Royster Chamblee read the correspondence between Dr. S. E. Moser, Chairman of the Program Committee, and Mr. Richard S. Tufts, President, Pinehurst, Inc.)

January 19, 1953

Dear Mr. Tufts:

As Chairman of the Program Committee of the North Carolina Dental Society, I would like to extend an invitation to you, as President

of Pinehurst, Inc., to give the address of welcome at our opening session which will begin at 8:00 P.M., Sunday, May 17th., at the Carolina Inn.

A letter stating that you will do this for us will be greatly appreciated.

Yours very truly,
S. E. Moser, Chairman
Program Committee

January 20, 1953

Dear Dr. Moser:

This will acknowledge your very thoughtful letter of January 19 extending me an invitation to welcome the members of the North Carolina Dental Society at their meeting at the Carolina Hotel.

On consulting my calendar I find that I am scheduled to be out of Pinehurst on May 16 and there may be some question of my being back in the village by the 17th of May. Of course if I am here I will be happy to be with you again, but I wonder if you would not wish to leave this part of the program out because of this uncertainty. Though it is always a pleasure to be with you, it occurs to me that the Dental Society has met here so regularly that at least from our standpoint it is certainly like old friends getting together again and a formal welcome may not be necessary.

I will certainly be happy to follow your wishes and hope you will let me know exactly how you feel in the matter.

Thanking you again most sincerely for your kind invitation.

Sincerely yours
Richard S. Tufts

January 26, 1953

My dear Mr. Tufts:

I am deeply grateful for your good letter of January 20th, responding to our invitation to give the address of welcome to the members of the North Carolina Dental Society next May.

I want to say to you, Sir, that I concur wholeheartedly in your suggestion that this traditional type of formal welcome be deleted from future programs of the North Carolina Dental Society. It is a time-consuming task on the part of all concerned; and since we are, as you say, old friends, it is a superfluous act.

Our present program is already set up for the press; but with your permission I shall at your allotted time have your letter read, along with this letter, to the members of the North Carolina Dental Society. The Society will be at liberty to take whatever action necessary to eliminate this feature from their future programs.

Be assured that we appreciate your past interest in making possible successful meetings of the North Carolina Dental Society in your good village.

With every good wish for your continued success, I remain

Cordially yours,
S. E. Moser, Chairman
Program Committee

PRESIDENT CURRENT: Thank you, Dr. Chamblee.

The Chair will direct Dr. S. E. Moser, Chairman of the Program Committee, to bring this matter to the House of Delegates. It will be considered as a policy of ours at times when we meet here.

The Chair will recognize Dr. Ralph Coffey of Morganton, Chairman of our Necrology Program.

Dr. Coffey!

DR. RALPH COFFEY: Mr. President, Members:

Once again it becomes the sacred privilege and solemn duty of your Necrology Committee to make its annual report. We come now to participate in a Memorial Service in remembrance of our friends and associates who have preceded us into that country from whose bourne no traveler returns. We for whom that journey is still incomplete pause in recognition of that far country, and in gratitude for our companionship with them during the days when we walked together.

Biographical Memorials of our deceased brethren have been prepared. They will not be read tonight, but will be preserved in our minutes for all to read. Tonight, as each name is called, the author of the memorial will come forward and present it, and light a candle to symbolize our continuing remembrance.

Dr. R. B. Harrill will present the memorial for Dr. E. G. Click.

EUGENE GRAHAM CLICK

1883-1952

Dr. E. G. Click died on June 17, 1952, after several months' serious illness.

He was born in Statesville in 1883. His family moved to Elkin while while he was still a child, and his home was there the remainder of his life.

He received his early education in Elkin Public Schools and Oak Ridge Military Institute, and his professional training at the Baltimore College of Dental Surgery.

Dr. Click was a member of the Methodist Church and, in addition to teaching, was continuously serving on boards and committees where faithfulness to Church and Christian character were needed.

He could always be found present at meetings of all kinds for civic improvement, where his honest approach and wise counsel were highly valued.

His loyalty as a member of the North Carolina Dental Society is well known. In addition to the large number of clinics he gave on full dentures in our own state, he traveled hundreds of miles to other meetings, giving freely of his time and knowledge.

I have never known a man the words "Christian Gentleman" would better describe. He was an honor to his profession.

DR. RALPH COFFEY: Dr. J. F. Reece will present the memorial for Dr. O. L. Moore.

OSCAR L. MOORE, D. D. S.

1885-1952

Dr. Oscar L. Moore of Lenoir, N. C. died at his home on October 31, 1952 after an illness of several months. He was sixty-seven years of age at his death. Dr. Moore was born in Caldwell County, the son of Richmond and Caroline Coffey Moore, members of one of North Carolina's most distinguished families. He was educated at the Globe Academy, and at the University of Maryland, where he was graduated in 1909.

After graduation, Dr. Moore practiced dentistry for one year at Beaufort, N. C., then returned to his native county, where for forty-two years he conducted a most successful practice, until shortly before his death. He was active in his chosen field, always seeking for self-improvement and for the continuing development of his profession. He was a member of the Tri-County, the First District, and the North Carolina Dental Societies, and also of the American Dental Association. His interest was manifested by his proficiency and skill in dentistry, and by his regularity of attendance at all professional meetings as long as his health permitted. He was held in high esteem and regard by all the members of his profession.

On September 1, 1920, Dr. Moore was married to Miss Marguerite Long, of Bridgewater, Va. There were no children. Mrs. Moore survives.

Dr. Moore was one of the most loyal and faithful members of the First Baptist Church of Lenoir. His life was truly Christian. His standard of ethics and character was the highest, yet he was never critical of anyone who failed to measure up. Of him it was said, "He was never heard to criticize anyone for anything." At the time of his death, he was Church Treasurer, a Deacon, and a Trustee. Through the years he gave liberally of his time and his possessions for the promotion of his church and its work.

Dr. Moore was a member of the Blue Lodge, A. F. and A. M. for forty-two years, and had been a member of the Order of the Shrine.

As a church man, a professional man, and a citizen, he rendered the highest type of service in full measure, unselfishly and unreservedly, always giving heed to the calls for help from any source. He loved his fellow men, and was greatly beloved of all who knew him. His departure leaves a wide gap in his circle of acquaintance. Quietly and unobtrusively he went about, attending to his duties and filling his responsibilities without fanfare. Of him, it can be truly said, "Well done, good and faithful servant."

DR. RALPH COFFEY: Dr. R. E. Williams will present the memorial for Dr. C. H. Geddies.

CLARENCE HUGH GEDDIE, D. D. S.

1885-1952

Dr. Clarence Hugh Geddie departed this life July 19, 1952, in Goldsboro, N. C. He was the son of James Daniel and Catherine Maxwell Geddie and was born October 19, 1885 in Cumberland County, N. C. He attended Trinity College, Durham, N. C. He received his dental degree from the Baltimore College of Dental Surgery and began his dental practice in Winston-Salem where he remained for twelve years. He moved to Fayetteville where he practiced for five years. He then accepted the position of resident dentist at the State Hospital in Goldsboro, N. C., where he stayed for eleven years. He returned to private practice in La Grange, N. C. where he remained until his final illness. He was buried in Wayne Memorial Cemetery in Goldsboro, N. C. on July 20, 1952.

DR. RALPH COFFEY: Dr. Guy Pigford will present the memorial for Dr. Roy Daniel.

ROY DANIEL, D. D. S.

We can think of no higher goal than that a boy should prepare himself for a life of service, then return to his home community and minister to the needs of his neighbors and friends. And if we are right in our judgment that this is a worthy ambition, then Dr. Roy C. Daniel saw its richest fulfillment.

Dr. Daniel was a gifted member of the dental profession. This we know from repeated comments of his fellow dentists who invariably praised his skill and workmanship.

He was a wise counselor and a good friend; and many times his patients left his office with the feeling that their dental work was only a part of the benefit they had received from their appointment.

Nor was his service to his community limited to his office work. His interests were many and varied, and just as in the practice of his profession, his goal was perfection. He was a man of sound business judgment, and for the past seventeen years had served as president of Southport Building and Loan Association. The dairy which he started as a business hobby is now the chief source of milk for Southport. A hardware store that he established as another outlet for his interest and energy is perhaps the town's most modern business establishment. He loved animals, and for years his sporting interest was centered in a succession of beautiful saddle horses. More recently he had set about the business of establishing a small model beef herd.

Towering over all these things were his pleasures as a dutiful son; an attentive and faithful husband; and a proud and loving parent. Add to

these his love for his church, and his loyal service to its program, and you have all of the ingredients of a rich, full life.

DR. RALPH COFFEY: Dr. Amos Bumgardner will present the memorial for Dr. T. P. Williamson.

T. PRICE WILLIAMSON, D. D. S.

1887-1952

Dr. T. Price Williamson of Charlotte, N. C. died in December 1952 at the age of sixty-five years.

He was born September 30, 1887 in Whiteville, the son of the late Jack Isham and Lucy Memory Williamson. He received his education in the Whiteville schools, at Oak Ridge College for Boys, and at Atlanta Dental College.

Dr. Williamson first practiced dentistry in Brewton, Alabama, for six years, then returned to eastern North Carolina and practiced in Cerro Gordo and Fair Bluff, for two years.

In 1921 he came to Charlotte and opened a dental clinic for the city schools. He remained at that post until 1935, when he opened an office for the practice of general dentistry, which he maintained until February 1952.

Dr. Williamson was a member of the local, state, and American Dental Associations. While in the active service of dentistry he filled many important elective and committee assignments on state and local levels of his dental organizations. He was a member of Psi Omega Dental Fraternity. He was a member of the First Baptist Church where he was superintendent of the Young People's Department for twenty years.

Dr. Williamson was a man of highest moral and ethical standards. His great affection for children and young people always kept him young in spirit and he was ever ready to win their confidence and approval throughout his long active career. We miss him around the fireside chat at night breaking the bread of experience.

Dr. Williamson is survived by his wife, the former Mae Metcalf of Geneva, Alabama, a brother, G. W. Williamson of Monticello, Mississippi, and several nieces and nephews.

DR. RALPH COFFEY: Dr. H. E. Plaster will present the memorial for Dr. R. C. Hicks.

ROBERT CLAY HICKS, D. D. S.

1886-1952

Dr. Robert Clay Hicks was born near Lawndale, North Carolina, March 24, 1886. After several years of declining health, he died March 26, 1952.

Dr. Hicks, the son of B. C. and Bobbie (Shields) Hicks, was educated at Piedmont High School, receiving his degree from Atlanta Southern Dental College in 1903. He began his practice in Fallston and after two years moved to Lawndale. Five years later he moved to Shelby and remained until his retirement from practice in 1945.

He was first married in 1919 to Miss Nellie Mae Harmon of Charlotte, who died in 1924. Of this union, one son, Robert Shields Hicks, survives.

His second marriage in 1937 was to Miss Erma Elliot of Lawndale, who survives, together with two children, Mary Anna and Charles Elliot Hicks.

Dr. Hicks was a member of the Palm Tree Methodist Church, a York Rite Mason, and was held in esteem by all who knew him. He will long be remembered in the hearts of the people of Cleveland County.

DR. RALPH COFFEY: Dr. Worth Byrd will present the memorial for Dr. F. W. McCracken.

FRANK WEBB McCracken, D. D. S.

1873-1953

Dr. Frank Webb McCracken, Dean of the Dental Profession of Sanford, N. C. and one of the founders of Lee County, died of a heart attack in Phoenix, Arizona, Sunday morning, April 12, 1953 at about five o'clock. He was eighty years old and had practiced dentistry in Sanford for fifty-four years.

He was born in Cedar Grove, N. C. on March 6, 1873 to the late John and Angeline Holt McCracken, one of four sons who were to achieve distinction in North Carolina life.

After attending Orange County schools, Dr. McCracken was a student at the Old Caldwell Institute at South Lowell in Orange County, finishing in 1895. He was graduated from Atlanta Dental College in 1898. After a year of practice in his home community, he came to Sanford in 1899.

He was a member of the Steel Street Methodist Church; was for fifteen years a member of its official board; and just last year was voted an honorary life steward. For fifteen years he was a teacher in the Sunday School.

Dr. McCracken's civic contributions were many. His accomplishments were recognized in 1946 with his selection as "Lee County's Man of the Year." He was one of the leaders in the legislative fight in 1907 to establish Lee County. When the fight was won and Lee County was created in 1908, Dr. McCracken was named Chairman of the Board of Education and served for three years.

He was a former president of the Fourth District Dental Society, a member of the North Carolina Dental Society, and the American Dental Association. He had a great interest in the establishment of the Dental School at the University of North Carolina. "The Dental School at Chapel Hill" was his favorite topic of conversation.

On Januray 25, 1899, Dr. McCracken was married to Miss Lillie Morris of Durham, who died in 1918. He is survived by two children, Miss Josephine McCracken and Frank Webb McCracken, Jr. of Sanford, and two grandchildren.

DR. RALPH COFFEY: In the absence of Dr. A. H. Ramsey, the author, Dr. Pierce Roberts will present the memorial for Dr. J. H. Hutchins.

JAMES H. HUTCHINS, D. D. S.

1889-1952

James H. Hutchins was born in Mars Hill, N. C. March 4, 1889. He was educated in the public schools there and attended Mars Hill College. His dental education was received at the Atlanta Dental College, from which he was graduated May 21, 1914. He took the state dental examinations in North Carolina and Tennessee the same year and began the practice of dentistry in Marshall, N. C. with his brother, Dr. Will Hutchins. After several months he moved to Burnsville, N. C. where he practiced about a year. He then practiced in Kingsport, Tennessee from 1915 to 1923. Then he returned to Marshall, N. C. to practice until his death November 18, 1952.

On January 2, 1915, James H. Hutchins and Bertie Thomas of Walnut Cove, N. C. were married. To this union a daughter, Marie, and a son, Howard, were born.

The dental profession, Madison County, and its neighbors have lost in the death of Dr. Hutchins a good dentist, a good citizen, and a good friend. His vocation was public service. This point might well be proven by his membership on many county farm boards and commissions to help in any way possible to improve the farming, livestock raising, and so forth, throughout the county. Dr. Hutchins was for anything that would help his fellow men. He served six terms in the General Assembly of North Carolina and one term in the Senate. He was for several years Chairman of his

party's county executive committee. Although a life-long Republican his integrity and high sense of duty won statewide respect from both parties.

Dr. Hutchins, a very devout man, was for years a leader and worker in his church. It was through his interest and leadership that a new church was built in his community. From this church, completed only a few months before his death, Dr. Hutchins was buried. In a way it is a memorial to his unflinching and unselfish life of public service to all the people.

DR. RALPH COFFEY: Dr. G. L. Overman will present the memorial for Dr. Samuel Edward Malone.

SAMUEL EDWARD MALONE, D. D. S.

1872-1952

Dr. Samuel Edward Malone died in the Wayne Memorial Hospital of Goldsboro, North Carolina, on September 29, 1952. He is survived by his widow, Mrs. Bertha Whitley Malone of Goldsboro.

Dr. Malone was born in Person County on December 13, 1872, the son of Egbert and Susan McGee Malone. Both parents were members of prominent families and natives of Person County. His brother, Admiral Ralph W. Malone, was the private dentist of President Franklin D. Roosevelt.

Dr. Malone attended the public schools in Person County and later entered the Thompson's Military Academy of Siler City, North Carolina. He was graduated from the Atlanta-Southern Dental College in 1905, with honors, and began his practice in Goldsboro in 1905. He was married to Miss Bertha Whitley of Goldsboro in 1910. Dr. Malone continued to practice in Goldsboro until 1928, with the exception of the time he spent in the service of his country. As a member of the North Carolina National Guard of the United States Army, he did Mexican Border duty. His rank was Captain while in the service, and as an outstanding officer of the Army, he was admired and loved by his men.

Dr. Malone retired from private practice in 1928 because of ill health, but continued to enjoy a full and useful life until a short time before his death. His hobbies were hunting, fishing, and his work-shop.

Dr. Malone was one of the outstanding dentists of his day, in that he was one of the best technicians and operators of his profession. He was a loyal member of the local and state dental societies.

Those who knew Dr. Malone feel a deep sense of loss. He was rich in good works; he thought always of the needs of others, and went about doing good to his fellow men.

"While on earth he filled a needed post,
With more than idle talk and boast.
He used his talents good and fine,
That were given him by The Divine.
With little thought of some gain to win,
But in service of his fellow men."

DR. RALPH COFFEY: Let us stand for a moment of silence.

"O Lord, support us all the day long of this troublous life, until the shadows lengthen and the evening comes, and the busy world is hushed, and the fever of life is over, and our work is done. Then of Thy mercy grant us a safe lodging, and a holy rest, and peace at the last, through Jesus Christ our Lord. Amen."

PRESIDENT CURRENT: Do these lighted candles bother anyone?

If they do not, we will allow these candles to remain burning during the remainder of this session, and we hope they will continue to burn as a guiding light in memory of those who have passed.

(The General Session was recessed in order to convene the Conjoint Session immediately.)

CONJOINT SESSION

PRESIDENT CURRENT: I am going to ask that the following people please come forward and take a seat on the platform as their names are called:

Dr. Paul Jones, President of the Dental Foundation of North Carolina, Inc.

The President of the North Carolina Dental Auxiliary, Mrs. H. O. Lineberger.

The President of the North Carolina Dental Hygienists' Association, Mrs. Nancy Horton of Henderson.

The President of the North Carolina State Dental Assistants Association, Mrs. Alice Reece, of Greensboro. I believe she has a visitor with her. I will ask her to kindly bring the visitor along.

The Chair will declare a temporary recess of the General Session of the North Carolina Dental Society and immediately declare us in Conjoint Session with the North Carolina Dental Auxiliary. The North Carolina Dental Hygienists' Association, and the North Carolina Dental Assistants Association are cordially invited to sit in with us.

A year ago, the North Carolina Dental Society by authority of its Executive Committee, extended to the Ladies' Auxiliary an invitation to

consider further development of the Dental Foundation of North Carolina, Inc. Mrs. H. O. Lineberger, President of the North Carolina Dental Auxiliary accepted this invitation. She named Mrs. Bobbie—as she is affectionately known—Mrs. Grady Ross as Chairman of this statewide committee. Mrs. Ross, will you please rise and come forward.

Excuse me for singling out this goodlooking lady in this fashion, but she has done a splendid job and I wanted everyone to see her.

The North Carolina Dental Society is honoring the Ladies' Auxiliary by meeting in Conjoint Session with them at this time. We extend to you our heartiest commendations. We should like, before we recognize these people, to have just a word from the President of the Dental Foundation, Dr. Paul Jones, if he wishes to speak.

Dr Paul Jones!

DR. PAUL JONES: President Current, Members of the North Carolina Dental Society, and Guests: I am certainly honored to be recognized by such a distinguished group of people as those who are interested in dentistry. As I understand from President Eddy, the North Carolina Dental Association, is very proud of the Dental Foundation of North Carolina, Inc., and the possibilities that its work might accomplish for dentistry and for the dental profession in North Carolina.

We conducted our campaign a few years ago for the assemblage of resources from the members of the profession. Up to date we have not bothered to disturb people in other walks of life toward the support of our Foundation. There is very much work and activity for the progress of the profession that as members of the Foundation we might pursue. I should like for all of us to be conscious of these possibilities and try to further them as we go along through life, in their importance, as we conduct our activities in the profession. We have plans for the future and we hope that those of you here will fit into those plans when they are presented to you from time to time.

We have some very enthusiastic support among the profession for the Foundation, and we are very proud of that enthusiastic support. It has been the source of inspiration to many of us who find we are carrying the leadership of the Foundation at the present time. We are very grateful for the support that we have had from time to time. We hope all of you may be corralled into our organization and that you will certainly lend your enthusiasm as we go along.

I certainly thank you for this opportunity. If there is any need for defending the cause of the Foundation, I am very grateful to you for what you have already done, and I hope our future growth will be with your moral support and your activities. I thank you!

PRESIDENT CURRENT: Thank you, Dr. Jones.

I should like to recognize Mrs. Alice Reece, of Greensboro, President of



Mrs. Grady Ross (left) Charlotte, chairman of the Dental Foundation committee of the North Carolina Dental Auxiliary, is shown here presenting to the North Carolina Dental Foundation, through its secretary, Dean John C. Brauer, a check for a \$700 contribution donated to the Foundation by the Auxiliary through publication of a memorial book honoring deceased members of the State Dental Society. At right is Mrs. H. C. Lineberger, Raleigh, retiring president of the Auxiliary.

the North Carolina Dental Assistants Association, who will bring us a word of greeting from this group. She has a guest whom she will introduce.

Mrs. Reece!

MRS. ALICE REECE: Mr. President, Members of the North Carolina Dental Society, and Guests: I bring greetings from the North Carolina State Dental Assistants Association.

We are very grateful to you for inviting us to meet with you again this year. We are very grateful for the cooperation you have given us this past year. We should like very much for you to visit us over at Holly Inn. You are welcome at any time.

I should like to introduce to you Mrs. Allan Roberts. She is the Fifth District Trustee from the American Dental Assistants Association.

Mrs. Roberts!

MRS. ALLAN ROBERTS: Mr. President, Officers, Members and Guests of the North Carolina Dental Society: It is certainly a privilege to be here. It is a privilege to get into the North Carolina Dental Assistants Association, but I certainly did not expect to have this great privilege of being here with dentists and the Auxiliary tonight.

I think this session is wonderful. We do not do this in Tennessee. I am from Memphis, and we do not have a joint session such as this. Now I have something new to take back to them. I shall have to tell them what I learned in North Carolina.

Thank you very much for the privilege of being here with you.

PRESIDENT CURRENT: Thank you very much, Mrs. Roberts!

Next we will have Mrs. Nancy Horton, President of the North Carolina Dental Hygienists' Association, who will bring us a word of greeting.

Mrs. Horton!

MRS. NANCY HORTON: Mr. President and Members of the North Carolina Dental Society, Distinguished Guests and Friends: On behalf of the North Carolina Dental Hygienists' Association, I should like to express my appreciation to Dr. Current for making this possible.

We are always grateful for the opportunity of meeting with you. We hope each and every one of you will attend any and all of our lectures and clinics. Thank you.

PRESIDENT CURRENT: Thank you, Mrs. Horton.

Next, we are honored to recognize Mrs. Henry O. Lineberger, President of the North Carolina Dental Auxiliary.

Mrs. Lineberger!

MRS. HENRY O. LINEBERGER: Mr. President, Members of the North Carolina Dental Society, the North Carolina Dental Auxiliary, and other Friends and Guests: When Dr. Current invited our Auxiliary to meet with you tonight, we lost no time in accepting that invitation. We are very happy to come to you tonight and give you some highlights of what we are attempting to do in order that the Dental Foundation may expand and grow larger each year. I hope that you will listen attentively and get a clear understanding of what we, your Auxiliary, are attempting to do in this field.

Before presenting the Chairman of that committee, I, would like to thank the North Carolina Dental Society for the privilege of having our program printed along with yours. We appreciate this very much, and we just want you to know that we thank you. Now, may I present Mrs. Grady Ross of Charlotte, Chairman of the Dental Foundation Committee of the North Carolina Dental Auxiliary.

MRS. GRADY ROSS: Mr. President, Members of the North Carolina Dental Society, Members of the North Carolina Dental Auxiliary, and Guests: It gives me a great deal of pleasure to be here and have the opportunity to present the program that the women have adopted to help you in this Dental Foundation. I know of no more fitting time to present our program to you than following this impressive Memorial Service you have had.

There is so much to say about the interest we have in the Dental Foundation, that I hardly know where to start. Perhaps it would be a good idea to tell you how we were brought into active participation in this work by reading Article II of the Constitution and By-Laws of the Dental Auxiliary under the subject "Objectives." The ladies in our group know the objectives of our organization, but I feel confident that not many of you men have heard them. I believe you will be interested in this.

"The objective of the Auxiliary shall be to bring into one organization the wives, mothers, and widows of the members of the North Carolina Dental Society so that they may promote friendliness among the families of the dental profession; interpret the aims of the profession to other organizations and individuals; assist in entertainment at meetings at which the North Carolina Dental Society is in attendance; and to do such other work as may be requested or approved by the North Carolina Dental Society."

To briefly sum it up, our organization is based on a four-point program. It is a program of friendliness, education, social activities, and service. It is this fourth objective which I wish to bring to your attention. It says, "to do such other work as may be requested or approved by the North Carolina Dental Society." We are in this work because you asked us to join with you.

Last year your President, Eddy Current, asked that we accept the Dental Foundation as our major project. The request coming from you

was not only a duty and an obligation and responsibility, but it was a challenge to the women, to your wives, to accept this responsibility and go about our work of helping you to reach your goal. We welcomed this opportunity, and after much thought and consideration, we decided to sponsor a Memorial Book dedicated to the deceased dentists of the state who had contributed so much of their time, talent, and energy in order that we and our children and our students at Chapel Hill may enjoy the benefits of a wide education.

We are not selling anything in this book. We have not a word to sell in this book. Nor are we begging for contributions. We are simply giving friends and families of deceased dentists an opportunity to establish living memorials to their loved ones by their contributions to the Memorial Book. The Foundation is the goal, and we want to always remember that that is the first objective of the Dental Foundation. The Memorial Book is a means to that end, and will help us reach that goal.

I should like, at this point, to show you the book. I think you will be interested in this. We have engaged the services of one of the best commercial artists in the state. Kenneth Whitsett of Charlotte is doing this design, and is working along with us on it. He has left a place for a seal. We are going to adopt a seal tomorrow at our meeting, and there is a place right here for it to be (indicating).

(Opening the book.) This is a memorial page set up exactly as the opening one. On this page (indicating) Mr. Whitsett has painted the new dental school in bronze tones. Over here (indicating) he has the most famous part of Chapel Hill, the old well. In the foreword we tell what the Dental Foundation is. In the second paragraph we tie in the gifts of today with that. If you will allow me, I should like to read this to you.

"The Dental Foundation is dedicated to the achievement of optimum dental and general health for its citizens. Its purpose is to augment services provided by the State of North Carolina so that the educational advantages in the field of research, medicalships, lectureships, visual education, and student loans will be the finest in the land."

The second paragraph is a quotation by Fielding. "There cannot be a more glorious object in creation than a human being replete with benevolence meditating in what manner he may render himself most acceptable to the Creator by doing good to His creatures."

The first memorial that has been established is to the former first President of the Dental Foundation, Inc., Dr. Henry O. Lineberger, dedicated by his family. The artist has used the torch, the symbol of our dental profession. At the bottom he has put laurel leaves of victory and death. He then has given a few of the highlights of Dr. Lineberger's life.

Our second memorial is to Dr. Samuel Edwards Malone of Goldsboro, dedicated by his nephew, Dr. Charles Baynes Hall and by the Wayne County Dental Society.

The 2nd District has established five memorials. The first one is to Dr. John Bumgardner of Columbia, South Carolina, a young dentist whose career was ended shortly after he started practicing. This memorial is established by his three brothers, Dr. Gaither Bumgardner of Columbia, South Carolina, and Drs. Amos and Franklin Bumgardner of Charlotte, North Carolina.

Dr. Theodore Price Williamson, one of our own dentists, who died in December of 1952. This is dedicated by a group of personal friends.

We have a dedication here to the parents of Drs. Grady and Heywood Ross.

We have two other dedications, but they are not ready to show. One is to Dr. John Styers Hoffman. His widow is in the Canary Islands and has not given me the data to go into the book.

The other one is a memorial established to all the former dentists of Charlotte who have practiced there from the time that dentistry came into Charlotte up to the year 1952. This was given by the Charlotte Dental Auxiliary, a group that has just completed its first year.

I think you will want to know the specific things we had decided on in the meeting today. The cost of each memorial page is \$100. We have the privilege of designating where these memorials will go, and that will be decided tomorrow. The limit is fifty words to the page. We first started out to have this just for dentists and their families, but we are going to have other requests from laymen. Our plan is to establish two books, and have one for the dental profession and one for the laymen, but until such time as that demand reaches the point where we will need another book, we will put them all together, just as for Drs. Grady and Heywood Ross for their parents. Eventually, that one will go in another book.

This book is to be kept at Chapel Hill. For the present, until people are familiar with it, we have set up committee chairmen and co-chairmen over the state in each district. Each district chairman will have this book for display; it will finally find a permanent place at Chapel Hill in the Dental School.

Dr. Eddy does not know about it, but his wife very graciously, in the meeting today, said he would be glad to make a glass cabinet and would inlay it. He will make something for this book to stay in that we will all be proud of. I hope she told him about it. (Laughter and applause.)

I should like to give you a financial report, and the cost of it. We have received \$700 in memorial contributions. The Dental Foundation Chairman considers it a great privilege to give this book to the Ladies' Auxiliary for them to use.

We received a gift of \$50. I must tell you about it. The Charlotte Dental Auxiliary wanted to honor their first President, and they have graciously made a purse of \$50 in the name of their first President, with the request that it go towards financing this book.

The Charlotte Dental Society was most generous in giving us a check for \$50 to finance the expenses of the book.

Two gifts of \$18 each, and anonymous gifts were received. The total was \$836. The artist charged \$65 for the drawings in the first part of the book. The artist is charging \$5 per page for the drawings on the individual pages. There are seven, making a total of \$35. The plate was \$15 for the lettering on the book. It will go on the outside. We are having the drawings done on parchment, which costs \$3. The other \$18 not included in this was the cost of the book. This makes a total of \$836.

Are there any questions from anyone? I should like for you, and the ladies would like you, to understand everything about it. If there are any questions that come to your mind, I would be very glad to answer them or try to.

Thank you!

PRESIDENT CURRENT: Thank you, Mrs. Ross, for this very splendid report.

MRS. ROSS: Mr. President, I did not get through with one of the most important things. I have a check for \$700 for you. That was the climax, and I forgot it!

(Dr. Paul Jones received the check.) (Applause.)

PRESIDENT CURRENT: Well, we all get a little nervous sometimes. Perhaps we say and do things we would not otherwise, but it all comes out OK.

We are grateful, Mrs. Lineberger and Mrs. Ross, for the work you are going to do and for the work you have done. We are glad to have had all these people with us tonight. We thank you.

Unless someone has something else to say to this Conjoint Session, we will declare it closed.

No announcement needs to be made at this time other than the fact that the House of Delegates is to hold its first session at nine-thirty. It is now ten minutes past nine. If it is all right with you, we will be glad to recess for about five minutes and then go into the business of the House of Delegates.

We stand adjourned.

(The meeting adjourned at 9:15 o'clock p.m.)

GENERAL SESSION

Monday Morning, May 18, 1953

The meeting reconvened at 9:45 o'clock a.m., President Current presiding.

PRESIDENT CURRENT: The meeting will please come to order. Vice-President Miller will preside. I now turn the meeting over to Dr. Miller.

(Dr. Charles I. Miller assumed the Chair.)

CHAIRMAN MILLER: Fellow Members of the North Carolina Dental Society, Ladies, and Distinguished Guests: It gives me great pleasure to present the President of the North Carolina Dental Society, who at this time will deliver his address.

PRESIDENT'S ADDRESS

Mr. Vice-President, Fellow Members, Distinguished Guests, Ladies and Gentlemen: I bring you greetings and best wishes for a profitable and pleasant participation in the functions of this convention. May each of you leave this meeting with the full conviction that your life has been enriched and sweetened.

Just two years ago I first realized that I would have the superlative honor and the tremendous responsibility of addressing you on this occasion. And since that time I have read and studied every presidential address to this society for the past fifteen years or more. These addresses have convinced me that the men who made them held a gratitude, an appreciation, and a loyalty not unlike the emotions that now fill and will continue to swell my heart as the years come and go.

To every committee of this society, to everyone connected with this hotel, to every member of this organization, and to everyone, everywhere who has contributed little or much to this year's accomplishments and to the success of this meeting, I am deeply appreciative; and I assure you that I shall long remember your many, many unselfish deeds.

Some of our members I would like to personalize for their splendid work, but in doing this, I could find no neutral place to stop. There is one, however, who is not a member of our society to whom I must pay a special tribute. This person has contributed immeasurably to the welfare of our society. For the past eight or ten years this one has worked many extra hours and days in the interest of our organization. Time will not permit me to elaborate further, but she has worked untiringly and has consistently refused remuneration for her services. I refer to and commend most highly my general office manager, Mrs. Margaret Hudson Caldwell.

The present dental tempo in North Carolina is indeed a rapid one. Only yesterday a North Carolina dentist might have said confidently, "I

am a member of a civic club; I go to church and take some part in the functions; I give my patients good service. What more should people expect of me?"

Certainly these are fundamentals in the life of a dentist. But they are only the basis on which the modern dentist must stand as he views factually the avenues through which he must continually pass in rendering an ever-improving dental health service to the people who call upon him. In a modern North Carolina dental perspective there must be incorporated a sense of personal responsibility to the Armed Forces, to dental relief, to group insurance, to hospital dental service, to the Veterans' Administration, to the dental assistants, to the oral hygienists, to the laboratory technicians, to the Ladies Auxiliary, to statewide fluoridation, to public relations, to the Division of Oral Hygiene, to the School of Dentistry, to the Dental Foundation, to better relations within our society, and to a more adequate application of our potentialities.

From a world outlook, it appears that armed peace or an armed truce is the best that can be hoped for in the foreseeable future. It behooves the individual dentists and the North Carolina Dental Society, therefore, to bend every effort toward a fair and adequate supply of dentists to the Armed Forces.

There is reason to believe that our relief fund will be more and more in demand in the years that lie ahead. The uncertainty of health in latter years, plus the fact that people in increasing numbers are living to a ripe old age justify this belief. I would suggest, therefore, that the Relief Committee and the Constitution and By-Laws Committee make a meticulous study of Section 21 of the By-Laws with the above thought in mind.

Our Society can look with justifiable pride upon the splendid work that has been done from year to year by our Insurance Committee. Members of our society have access to a protection that they could not receive but for the efforts of this committee. Section 15 of our By-Laws says that the Insurance Committee shall have charge of all the insurance activities of our society. And I emphasize the fact that industrial insurance and the various health insurance policies could be greatly improved from a dental standpoint. For example, if a health insurance policy pays the surgeon's fee for an appendectomy, why should it not pay a comparable fee for the removal of an impacted tooth, whether the patient is hospitalized or ambulatory? The answer is simple. We have not pressed hard enough for it. And patients simply do not understand it. It is difficult, even embarrassing, to try to reason with a patient on the present insurance compensation for ambulatory, oral surgery cases. We are in a bad light here, and our Insurance Committee should be ever on the alert in working for an adequate correction of all insurance deficiencies.

The demand for hospital dental service is expanding rapidly and greatly. The change in our dental law to allow internships for unlicensed dentists and qualified dental students under stipulated supervision in



President Current and Legislative Committee Chairman Z. L. Edwards

hospitals having aproved dental departments offers a great opportunity both in clinical experience and in service to needy patients.

And may I digress to pay tribute to our Legislative Committee for the excellent work it has done this year in drafting changes that bring our dental law up to date. It was a tough assignment, but this committee has done it meticulously and well. These men have earned our heartiest commendation.

Now to return, local dentists and dental societies should work for the establishment of dental staffs and the creation of dental departments in local hospitals. But the certainty of maintaining a dental department on an approved and creditable basis should also be seriously considered. No department at all is better than one that does not function and reflect dignity.

The scope of this address does not permit a detailed discussion of the socialistic perils now so dangerously threatening. But I must make an effort to arouse you in this connection. I wish I could literally frighten you into seeing the terrible end results both possible and probable in the problems of our ever-increasing number of war veterans. We know of the work being done for veterans on a government paid basis. But most of us do not realize that not more than fifteen percent of the total number of veterans eligible for government-paid service are now applying for such treatment. Envision if you can six times the number of veterans now applying for treatment at government expense. Add to this the veterans of the third world war, and we would then have around thirty million people with a lifetime claim on our government for some type of health service. And when the going gets tough, as it inevitably must, they will demand this treatment. Now the appalling thing about this is not the fact that we will have become by this one thing alone the servants of the government. It is found in the truth that this and other dependencies will bring us dangerously close to having half our people dependent upon some sort of subsidy. And the further and final truth is that no nation in history has survived when more than half its people became dependent upon the remaining populace.

Not for one minute would I deprive any veteran of his just rewards. But every veteran knows that he fought for freedom. Freedom is our slogan. But I must remind you that freedom is not only bought with a price but must be maintained by a price. Individual freedom means individual responsibility. Individual freedom in reality is an individual sustaining himself in a society of free human beings. Therefore, the price of a free man's patriotism is not, and can never be, a life-long, material dependence upon the government to which patriotism is due.

Moreover, the true patriot, the true dentist, knows that it is his responsibility and opportunity to reach the dental needs of the people through auxiliary personnel. The dental assistant is of inestimable value in this connection. And I commend most highly our Committee on Edu-

cation for Dental Assistants. It has done a splendid work. This committee has laid the foundation for a plan that will make available a university-supervised training for dental assistants throughout the state.

Then, too, the oral hygienist is destined to play an ever-increasing part in dental health service. Many dental schools already operate excellent departments for the training of oral hygienists, and our own School of Dentistry will presently initiate a program to train them. This means that you, as a North Carolina dentist, have a very definite responsibility in assisting the hygienists in their efforts to integrate themselves individually and collectively to the best possible advantage in our over-all dental health service. The Advisory Committee to the Oral Hygienists has done eminently good work this year, and it is hoped that this work will be continued.

And by no means least in the field of auxiliary service are the commercial laboratory personnel. They are to be congratulated on the many ways in which they are improving their means of serving the dental profession. The Committee on Prosthetic Dental Service has been a stabilizing power in bringing a closer and better relationship between the profession and the accredited laboratories of our state. And the road of progress beckons us on to closer and closer cooperation in this field.

And our Ladies Auxiliary, though not technically classified as auxiliary personnel, are aids to dental-health-service progress in a far broader sense. You have heard previously of their efforts this year in support of our Dental Foundation. I cannot verbally express the power that the auxiliary can be in developing our Dental Foundation and in developing any worthwhile objective to which they set their minds. I challenge the auxiliary to continue fervently the Dental Foundation work for which they have this year laid a firm foundation.

But we must look realistically upon even broader fields of dental health service. Fluoridation of communal water supplies, for example, must be our objective until every child in North Carolina is regularly drinking fluoridated water. It is trite to mention to a group of dentists the benefits derived from fluoridated water. It is sufficient to say that the splendid work carried on last year and this year by our Committee on Fluoridation should not be permitted to lag. More than forty towns and cities in North Carolina either have fluorine in the water or are well on the way to the consummation of this goal. Fluoridation and Public Relations have been combined this year, and certainly there can be no better method of strengthening our relations with the people than by improving the dental health of our children.

Furthermore, it is hardly necessary to review again the outstanding work that has been done by our Division of Oral Hygiene of the State Board of Health. Dr. Branch, the venerated head of the Division, is eager to see the dentists of the state put forth every effort to make the best possible application of the school health funds that may be directed into dental channels for aid to dentally indigent children. A special committee

has been set up to work with all interested parties in an effort to direct this service to the best possible advantage. But the success of this effort calls for the fullest cooperation by every dentist in the state. It is a challenge and a serious responsibility that confronts us. It is true that the question of money being directed to the school authorities for health service is a debatable one. But it is not a controversial matter to say that at least emergency dental health service should be made available to every child in our state. A child in distress or pain has no thought, nor should he have, of whether his being relieved violates some political, moral, or professional code of ethics to which long adherence may have caused some of us to conclude that our philosophy is completely righteous. Too, the loyalty and frugality that Dr. Branch has demonstrated is unprecedented in his field. The "Little Jack Loan Fund for Dental Students" is a concrete example. \$22,500 has been designated by an act of the Legislature to be set aside by the division of Oral Hygiene of the State Board of Health for loans to dental students who meet the requirements for such loans. Time will not permit a complete discussion of the "Little Jack Loan Fund"; but it is something concrete by which the nationally famous *Little Jack Show* will be commemorated and by which worthy dental students will profit. Dr. Branch has earned our highest commendation; and we are honored to have man of his stature labor among us.

But the basic factor in our dental health problem is adequate numbers of properly trained personnel. And it is here that our University's School of Dentistry will be constantly answering the public call for more and better dental health service. Our School's contributions to a better dental health service will be manifold. On the high school and college campuses of our state young men and women will hear about dentistry as a career and about the excellent opportunity our School of Dentistry offers for local training. We will thus get our pro rata share of our state's best young people, and the opportunity for graduate and post graduate study will be unlimited. Hence, our aging servants in the dental field can keep young in knowledge and in refinement, giving our people the best that comes as science moves on. Like the three great schools of medicine in the state, our teaching and serving institutions will become the center for difficult dental problems. Unsolved dental cases, conditions baffling to dentists in general will be studied. Efforts at their solution will be tabulated; results of various procedures compared; and people throughout this area will be recipients of improved service as this knowledge is disseminated.

And I cannot move on until I pay special tribute to the present Legislature, to the Legislature two years ago, and to the University Administration for their untiring efforts in making our School of Dentistry what it is today and what it is destined to become as the shining light in dental health service to all our people.

Furthermore, the Dental Foundation of North Carolina, Inc. is destined to be the sustaining arm in fields of dental education outside the realm supported by the Legislature. Aid to worthy students, scholarships, a

visual education library, research projects, and many other possibilities are within the scope of our Foundation. In fact, the Foundation is now sponsoring a research project at the University. The workers are attempting to ascertain how fluorine acts to reduce caries when administered to animals by water intake. Hamsters and other animals are being used in the studies.

And let us ever be mindful of the fact that the thing sought in research is in no sense the most important discovery that may come to light as a result of it. William Conrad Roentgen was not looking for the X-ray particularly as he studied the color effects produced by forcing an electric current to pass through rarefied space. Many of the most valuable and life-sustaining things we enjoy today are the by-products of research efforts directed toward other objectives. The important question is: Do we have the foresight, the insight, the initiative, and the determination to see to it that dental research goes on by the means at our command?

Are not these opportunities and responsibilities sufficiently challenging to cause each of us to see the absolute necessity for closed ranks and total unity within our organization as we move in pursuit of our objectives? And in this sense, willing, able, unselfish leadership is indispensable. This type leadership must be regularly ferreted and set before our membership in true perspective. To my personal knowledge this thing has been constantly attempted by a few forward-looking men for the past twenty-eight years. But these men have been doing this without authentication. Consequently, they have been wide open to criticism. Their work has been, I repeat, a work of necessity; but it should be done in a manner that would forestall criticism. Criticism even of a just work is nothing in itself. But the critic has influence. He creates a following whether or not he so intends. And his followers become a clique banded together and working together as a unit within the over-all organization. There is a wall of separation between such a group and the remaining membership of the parent organization. This line of cleavage is exactly what the self-aspiring, self-promoting person is looking for. It is the narrow, undefended passage-way through which dictators, selfish aspirants to positions of leadership, and all unworthy and unqualified men have found their way to the top.

Now, I cannot denounce this thing of men who have only selfish motives for gaining positions of leadership. I do not have words sufficiently strong for such condemnation. But I can cite you one who has placed it in the diabolical position it deserves. The narrow, undefended space between two factions in a religious organization was the road to the position of bishop for the self-aspiring man from whose spiritless words the great Milton was running. And of all self-appointed, self-interested leaders said the immortal Milton in his *Lycidas*:

"And when they list, their lean and flashy songs
Grate on their scrannel pipes of wretched straw;
The hungry sheep look up, and are not fed,

But, swoln with wind, and the rank mist they draw
Rot inwardly, and foul contagion spread;"

Yes, when faction is pitted against faction in any organization, the entire membership suffers. Worthwhile objectives are hampered, if not stymied. Hatred, jealousy, stagnation, even putrefaction, take the place of coordinated effort to serve mankind. This is not a rule. It is a fact substantiated, I repeat, by all history. Then why, I ask you, should we remain complacent when we see the amorphous head of this monster rising in our midst?

Again I say, men of forward outlook must be on the alert for executive and leadership abilities among us. But in this activity, as in all others, we should, if within our power to do so, carry on our work in such fashion that group opposition to it would not be possible. Therefore, I must with all the force at my command urge you to adopt the resolution now in the hands of the Constitution and By-Laws Committee. This resolution provides for a nominating committee of five men to serve for one year. Each district shall have one member on the committee, and each district shall elect its member by a majority vote of the district society at each fall meeting preceding the next annual state meeting. This committee, made new by majority vote of the members year by year, would be as up to date and as democratic as democratically-minded men could make it. It would stand as our members' representative body ready to hear and evaluate all suggestions for prospective officers for our society. Also, this committee should annually name the man to be honored at our banquet. We will have from now on an increasing number of members eligible for this high distinction, and certainly no group would be more representative of the wishes of this society than a committee set up annually by popular vote of our members. This committee should designate their choice of an honoree as North Carolina's dentist of the year.

This will not eliminate politics. But it will give popular vote authentication to the initial maneuvers of state society politics. It will be the voice of our members in action from the word "Go". It can breed no accumulative criticism. Therefore, it cannot create factions. It will stabilize. It will unify.

And now, I shall offer the following recommendations:

1. That the work of the Committee on Education for Dental Assistants be continued.
2. That the work of the Advisory Committee to the Oral Hygienists be continued.
3. That our society continue to support and sponsor the fluoridation of communal water supplies and public relations.
4. That the official family of the North Carolina Dental Society give assistance to the Advisory Committee of the Veterans' Administration in the committee's efforts to bring about

constantly improving relationship between the Veterans' Administration and the members of our society.

5. That this Society urge its House of Delegates to adopt the resolution on a state Nominating Committee.

Finally is it not in order for us to pause briefly to consider and attempt to evaluate our potential for the consummation of our objectives? This potential lies mainly in two broad divisions.

In the first place, the wisdom that years of activity have gleaned for our aging members is indispensable. But it must be properly channeled. It cannot always lead. It must temper; it must direct; it must underlie; it must stimulate. For this directing, stimulating, backing-up wisdom on the part of men like Dr. Fred Hunt of Asheville, the late Dr. P. R. Falls of Gastonia, Dr. J. S. Betts of Greensboro, Dr. J. Martin Fleming of Raleigh, and many others, we owe a debt of appreciation that we cannot live long enough to repay fully.

Then, too, increasing numbers of the finest young men ever to cross our threshold are coming in. They are clean; their minds are open; they are as an engine without tested governors. They are filled with energy; their enthusiasm knows no limit; it is without boundary. They are climbing the eastern slope of life's highway. It leads to the summit of life's upward climb where the noonday sun shines straight down upon the travelers. But the evening sun is projecting your shadow and mine longer and longer toward the western horizon where it shall fade into and beyond the twilight.

No, we cannot lead these young human dynamos. But we can stay out of their way. And in clearing their road, we can let them know that we are standing by the dangerous curves, that we are brakes for the downward go of the steep decline, that we will scotch when the engine runs hot on the upward pull, that we will wave the red flag when the bridge is out. In short, we can be the mortar and the rock on which the beautiful edifice these brave youngsters are building may stand.

If in such fashion we will amalgamate the wisdom of our aging members with the superb training and limitless drive of our youth, we shall meet victoriously every menacing obstacle and every challenging opportunity that the future may hold. And those from without who look upon our activity will be constrained to conclude that we are and that we shall remain the North Carolina Dental Society, United, Militant, and Exemplary.

CHAIRMAN MILLER: Dr. Current, I know that I am voicing the sentiment of the entire group when I say this address has been most inspiring and instructive.

I shall now appoint the following as a committee to report on the President's address:

Dr. Walter Clark of Asheville, Chairman.

Dr. Claiborne Poindexter of Greensboro.

Dr. Zeno Edwards of Washington.

I have in my hand three copies of the President's address. You gentlemen may each have a copy of it to work with.

I shall now turn the Chair back to President Eddy Current.

(President Current resumed the Chair.)

PRESIDENT CURRENT: We have a few announcements that should be made.

In presenting the first gentleman for announcements, may I say of his habitat that the relationship is so close and beautiful between his state and ours that a section of the American College of Dentists has been designated the Carolina Section. We in the Carolinas have a relationship that I dare say few other states in the Union have. We have always enjoyed the fine men that come here from that lovely state. We are happy, now, to present the President of the South Carolina Dental Society, Dr. C. E. Saunders, who will make some announcements.

Dr. Saunders!

DR. C. E. SAUNDERS: Mr. President, Mr. Secretary, Ladies, Members, Guests: To be very brief, I thought these announcements would possibly be of interest to all of you.

I bring you greetings from your sister state south of your border. It is a pleasure to have all of the North Carolina men, or as many as possible, attend our meeting. I have three brief announcements.

Announcement No. 1 has to do with an historical event. That is usually a very boring item, but our Association has done considerable research to determine that Josiah Flagg was the first American-born dentist who was a full-time dentist and not an umbrella fixer or a spoon maker. That opinion is concurred in by recognized historians, with only one exception.

The City of Charleston has become convinced that that is the case. Charleston has appropriated a substantial sum of money, and so has the South Carolina Association. On June 17 we shall have exercises in Charleston in the Old Congregational Circular Church, in the old churchyard, built in the 1700's. Josiah Flagg lies buried there. We shall have a monument to his memory. Dr. Fagot from the University of Pennsylvania, will make the dedicatory address.

If any of your members are interested in attending those exercises, we shall certainly be delighted to have you.

The Charleston Dental Association is giving a cocktail party immediately after the exercises, and they extend an invitation to you to attend.

Item No. 2 has to do with our dental school.

On Wednesday, a week ago, we, the officers, stood around the chair of Governor James Byrnes and witnessed the signing of a legislative bill authorizing a dental school for South Carolina. It has been a long struggle. We feel that it is needed. We are now in the midst of an eleven million dollar expansion of our medical facilities. Our dental faculty is to be added to that and is to cost around a million and one-half dollars. Of course, many of the medical facilities can be used for dentistry.

We feel that we are going to be proud of our dental school the same as you gentlemen are of yours. I do not know that we are going to be able to afford quite as fancy a one as you have because you certainly have a fine school there. We extend an invitation to you, if you come to Charleston, after we get it constructed, to visit our dental school.

Item No. 3 is this: this year we are holding the first full seven-day meeting of the State Association in the history of dentistry in this country. We could be wrong, but we have not found yet that we are.

Our meeting, as many of you know, is to be held in the form of a Caribbean cruise. We sail on the seventeenth day of June. We are to be gone one week beginning June 17, visiting Havana, Nassau, and back to Charleston. We have the Chief Oral Surgeon of Johns Hopkins on the program. We have an outstanding prosthodontist on the program whom we feel is going to be enjoyable and instructive.

I have circularized all of your membership. Bernard Walker provided me with a list. I mailed out 940 brochures to members of this association. We likewise extend the invitation to any Dental Assistants or Auxiliary personnel of any kind in North Carolina, including your supply and laboratory personnel. At the moment we have already had quite a number of North Carolina people applying. I am still holding forty spaces for this state. We surely hope that you gentlemen will come and join us and take up those forty spaces.

It is a pleasure to be with you. Thank you.

PRESIDENT CURRENT: Dr. Saunders, we want to thank you for these very timely and informative remarks. We want you to know that we are proud to consider South Carolina the state on which we stand. You are the foundation for this state of ours, the basis on which we grew up.

We want to give you this one word of warning, Dr. Saunders: our boys are not very accustomed to getting very far from home, so when you get them out on the ocean, do not get them too seasick.

DR. C. E. SAUNDERS: Thank you.

PRESIDENT CURRENT: We have another very distinguished guest in our midst this morning. Now that you know the rock on which we

stand, we shall tell you about the sky that shines over our heads, upon which we gaze at the stars and get our inspiration, the State of Virginia.

We have the distinguished President of the Virginia Dental Society, Dr. J. B. Todd.

Dr. Todd, please come to the platform!

DR. J. B. TODD: Mr. President, Members of the North Carolina Dental Society: I bring Greetings to you from your northern neighbor, the Virginia State Dental Association.

We have just finished our annual meeting in Roanoke. This is my first visit to the North Carolina meeting, and from the appearance of your program, it is going to be an excellent session.

I do not feel like a total stranger, because about 20 per cent of my class now practices in the State of North Carolina. At our Roanoke meeting, the following resolution was unanimously adopted. I hope North Carolina will approve and concur in it. The resolution reads as follows:

"BE IT RESOLVED, That the Virginia State Dental Association endorses as a candidate for the office of President-Elect of the American Dental Association Dr. James H. John of Roanoke, Va. Dr. John has served faithfully as a Trustee to the American Dental Association from the Fifth District. (Of which your state is a member.) He has been Secretary and Treasurer of the Virginia State Dental Association for approximately eighteen years. A great part of his life has been devoted to the activities of organized dentistry.

"Therefore, it gives me a great deal of pleasure to present his name to you for your consideration."

I know your time is short, so my next announcement will be an invitation to our meeting, which will be held next year in Richmond. It will be held the second Monday, Tuesday, and Wednesday in April. I extend to you a cordial invitation to attend.

All of you people have new dental schools. Next year in Virginia we shall have a new dental building at the Medical College of Virginia. It perhaps will not be the largest in the world, but certainly it is going to be one of the most modern.

I thank you very much!

PRESIDENT CURRENT: Thank you, Dr. Todd. We appreciate, and I speak for the members of this Society, your speaking once again from the stars of Virginia. We appreciate your coming and we hope you will come back as often as you can.

I see your smiling candidate over there. I hope he is successful.

Thank you very much.



Good Fellowship!

Dr. Paul Fitzgerald, Jr. has an announcement that he would like to make, as Chairman of our Library and History Committee.

DR. PAUL FITZGERALD, JR.: Thank you, Mr. President.

Members of the North Carolina Dental Society: The hour is approaching when one of our publications will become a museum piece. I refer, of course, to the **HISTORY OF THE NORTH CAROLINA DENTAL SOCIETY**. You are where you are because of the men who dared to hope and work for our benefit in the years that have gone into the making of the North Carolina Dental Society. Picture, if you will, Dr. B. F. Arrington of Goldsboro in the days that are gone, persuading Dr. Vince Turner to join him in a fight for the first law to regulate and protect the practice of dentistry in North Carolina. Dr. Arrington spent what is the present day equivalent of \$5000 out of his own pocket to get this law passed in the Legislature. Those were the days when any man who hung out a bloody rag and a string of extracted teeth could pursue the trade of dentistry, because it had not yet become a profession. Those were the days when there was no one to say he could not do so.

Picture the heritage of progress handed down to men such as Dr. Clyde Minges, and the late Dr. Lineberger, who have in their turn passed it on to us.

When the present supply of the **HISTORY OF THE NORTH CAROLINA DENTAL SOCIETY** is gone, there will be no more available. It is out of print. Be sure that you get your copy before all are gone. They are on sale in the outer lobby or foyer. See either Mrs. Longwall or Mrs. Henderson today while they are still available. The cost to you is \$3. Their value cannot be estimated.

Thank you!

PRESIDENT CURRENT: Thank you, Dr. Fitzgerald, for this announcement.

We shall ask our Secretary, Dr. Bernard Walker, if he has additional announcements to make.

DR. BERNARD WALKER: We have communications from three of our members who are unable to attend due to illness: Drs. Dan B. Mizzell and C. F. Taylor, both of Charlotte, and Abernethy of Hickory. These men have been regular in their attendance, but due to illness, they have been unable to attend.

There are others you know of who are members of this Society who also have been unable to attend. We should like very much to have their names in order that we may send them greetings from the North Carolina Dental Society.

Dr. Ralph F. Jarrett, Chairman of the Clinic Board of Censors, would like to meet with his men at nine o'clock tomorrow morning.

I might inform you that as of last night at ten o'clock, the official registration was 496. It is by far the largest we ever had in any previous convention.

PRESIDENT CURRENT: Thank you, Dr. Walker.

We recognize Dr. Tom Blair, who will present our Out-of-State guests.

DR. T. L. BLAIR: Mr. President: We have a number of distinguished guests with us, I should like to recognize them at this time.

Dr. O. W. Brandhorst, St. Louis, Mo., President of the American Dental Association.

Dr. LeRoy Ennis, Philadelphia, Pa., Immediate Past President of the American Dental Association.

Dr. J. E. John, Jr., Trustee, Roanoke, Va.

Dr. Harry Lyons, Richmond, Va., the Medical College of Virginia.

Dr. J. F. Volker Birmingham, Ala., Dean of the University of Alabama Dental School.

Dr. John Fauber, Head of the Veterans Administration in Washington, D. C.

Dr. Shailer Peterson, Chicago, Ill.

Dr. J. W. R. Norton, Raleigh, N. C.

Dr. Guy Harrison, Richmond, Va.

Dr. Harrison M. Berry, Jr., Philadelphia, Pa.

Dr. Howard Higgins, Spartanburg, S. C.

Dr. Belton Hair, Spartanburg, S. C.

Dr. R. E. Christmas, Columbia, S. C.

Dr. E. G. Bumgardner, Columbia, S. C.

Dr. Ray W. Fields, Johnson City, Tenn.

Dr. J. R. Finn, Johnson City, Tenn.

Dr. Albert E. Lawrence, Chattanooga, Tenn.

Dr. D. F. Rentz, Miami, Fla.

Dr. P. L. Connors, Youngstown, Ohio.

Dr. Howard Hayden, Youngstown, Ohio.

Dr. H. M. Bennett, Youngstown, Ohio.

Dr. L. H. Davenport, DuBois, Pa.

Dr. J. P. Broaddus, Franklin, Va.

Dr. Eugene B. Wyman, Cambridge, Mass.

Dr. I. H. Harris, Westfield, N. Y.

Dr. Marjorie Houston, Birmingham, Ala.

Lt. Col. E. R. Wilink, Fort Bragg.

Dr. Robert P. Stiekley, Lynchburg, Va.

Dr. Felix Neri, Oteen, N. C.

Dr. C. B. Hall, Washington, D. C.

Major Thomas R. Cole, Pope Air Base.

Dr. G. C. Nichols, Chester, S. C.

Dr. Ben H. Williams, Butner, N. C.

Comdr. W. H. McCabe, 6th Navy District, Charleston, S. C.
Dr. Harold B. Friedman, Pope Air Force Base.
Capt. Charles Rosoff, Pope Air Force Base, 10th District, N. Y.
Capt. William W. Houser, Pope Air Force Base, 9th District, N. Y.
Dr. John E. Fraser, Crawfordsville, Ind.
Dr. Henry T. Clark, Jr., Chapel Hill, N. C.
Dr. Walter H. Luers, Grand Island, Nebr.
Lt. Col. W. J. McAllister, Pope Air Force Base.
Dr. Richard J. Eamich, Winston-Salem.
Dr. Thomas R. Collins, Moody, Ga.
Dr. Nelson Large, Alexandria, Va.
Dr. Victors Leocha, Annapolis, Md.
Dr. R. W. Rasmuson, Denver, Colo.
Dr. D. W. Jones, Franklin, Va.
Dr. William Nixon Holmes, Chicago, Ill.
Dr. Tristram W. Bethea, Lancaster, S. C.
Dr. F. O. Lentz, Bennettsville, S. C.
Dr. Conrad Nagel, of the American Dental Association.

Although I did not get his registration, I think I see Dr. Knudson of the United States Public Health Service.

(The above-named Out-of-State guests rose in turn and were applauded.)

DR. BLAIR: We hope you enjoy your stay here and that you have as much pleasure being with us as we have in your being here.

Thank you very much!

DR. P. L. CONNORS: Dr. Hayden is past President of the Ohio Dental Association and past Third Vice-President of the American Dental Association. In all the years he has practiced he has only missed three Dental Association meetings. One was on account of a little snow we had up there last year, and two were on account of sickness. He is eighty-four years young.

DR. BLAIR: Thank you, Dr. Connors

PRESIDENT CURRENT: Thank you, Tom, for presenting our guests. The Chair extends a hearty welcome to each of you.

We should like to have Greetings from Dr. Reece Berryhill of Chapel Hill, North Carolina, who brings Greetings from the North Carolina Medical Society. He is Dean of the Medical School of the University of North Carolina.

Dr. Berryhill!

DR. REECE BERRYHILL: Members and Guests of the North Carolina Dental Society: I approach this job with much humility. If I could,

I would remind you of the old adage about North Carolina being the valley of humility between two mountains of conceit, but our good friends from South Carolina and Virginia are also here.

First of all, let me say it brings me great pleasure and it is a great honor to represent the North Carolina Medical Society at your annual meeting. I bring good wishes and Greetings from the Medical Society to the Dental Society.

I have no speech to make, Mr. President. I hope that as all of you come to Chapel Hill to see the fine School of Dentistry, you will remember that we are right next door and that you will go through one of the corridors and come over to see the people in the Medical School as well. I hope that in the future, as in the past, the two professions can work closely together in trying to solve some of the many knotty problems that confront us both.

I am sure you have a grand program, and I am happy to be a part of the day.

PRESIDENT CURRENT: Thank you, Dr. Berryhill, for these Greetings. We know how busy you are and we know the caliber of man you are. If I had time I would tell these folks. We are grateful to you for being here. Thank you.

We would like to have greetings from the American Dental Association by the Fifth District Trustee, Dr. J. E. John of Roanoke, Va.

Dr. John!

DR. J. E. JOHN: President Current, President of the American Dental Association, Dr. Brandhorst, Distinguished Guests, and Members of the North Carolina Dental Association: It is a privilege to be with you during this, your Ninety-seventh Anniversary Meeting of the organization in your state.

I am to join Dr. Brandhorst in bringing you Greetings from the American Dental Association. I have asked your President for five minutes to say just a few things. He very graciously granted me the privilege.

On October 1, I will have served six years as your Trustee. The support you have given me is deeply appreciated, and on behalf of the national organization, I wish to thank those of you who have given so generously of your time and effort in support of our rapidly developing program by serving on committees and councils. Our heritage is the result of a century of concentrated effort on the part of our leaders past and present. The extent of dentistry's influence and effectiveness in the future will depend, in great measure, upon leadership such as you have furnished and the willingness of each and every member to assist in formulating and carrying through a program of progress.

A review of the accomplishments of the past is always interesting, but you have had many of them recited to you by me and other speakers who have appeared on your programs in recent years.

In this report, I would like to discuss with you briefly, some items of current interest.

Much as I dislike to deal with figures in a talk such as this, I believe you should know from me, as your Trustee, what is being done with your money, particularly, the amount in excess of operating cost. To report a balanced budget in 1951, your Board of Trustees found it necessary to reduce the budget asking \$282,255. The report was submitted to the House of Delegates with notations as follows:

If the Association is to meet all of the requests made by various agencies for 1951, a total of \$280,000 must be found in new income and the only source of new income in this degree is from the dues of members. The sum of \$280,000 represents an increase of approximately \$4.00 annually in the dues of each member.

The Board of Trustees, however, does not believe that it is sensible to look only to next year. Common sense dictates that the Association know, with reasonable certainty, what it will have available for activities in the next five years.

The Board of Trustees believes that events in the next five years will make imperative the expansion of program at least to the point where \$100,000 annually will be needed.

If a moderate expansion of \$100,000 in activities can be predicted in the next five years, the Association will need new income in the amount of \$100,000 annually to sustain that activity each year.

Total new income needed annually for the next five years, \$380,000. In order to carry out this program at a cost of \$380,000, the Association will need an annual increase of dues of approximately \$6.00 from 60,000 members.

The House of Delegates raised the dues \$8.00.

In 1950 a Restricted Reserve was set aside as a part of the General Fund by action of the Board of Trustees. By a later action, the Board committed to the Restricted Reserve the annual excess of income over expenditure and the earnings on investments. By the end of 1951 the Restricted Reserve amounted to \$699,278.59.

During the fiscal year 1952, the three following allocations were made to the Restricted Reserve:

Excess of income over expenditures for fiscal year 1951,
\$225,879.91.

Budgeted excess of income over expenditures for fiscal year 1952, \$203,919.00.

Earnings on investments in 1952, \$39,444.83.

Total allocations to reserve in 1952, \$469,243.74.

Total restricted reserve at December 31, 1952, \$1,168,522.33.

The protection and improvement of the health of the public, the protection and improvement of the profession itself, and the dissemination of information to both the public and the profession are the objectives of the ADA. The Board of Trustees and the Central Office Staff are making, and will continue to make, every possible effort to create a reserve to protect the present program against a possible diminished income.

At the present time, Public Law 779 (Physicians and Dentists Draft Law) and the sick and accident insurance program sponsored by the ADA are the two items which seem to be of particular interest to our membership. Public Law 779 expires on July 1. The questions are, will the present draft law be extended unchanged, or will it be amended. If amended will the provisions be in the best interest of the profession and the public? Your Board has attempted to answer these questions by adopting the following resolution for the guidance of the Council on Legislation:

Amplification of Policy on Dental Draft Law

The Board of Trustees at its meeting in February 28, 1953, adopted the following resolution with respect to Public Law 779:

RESOLVED, that in fulfillment of the resolution adopted by the House of Delegates in 1952 on the continuance of Public Law 779, the Council on Legislation be directed to attempt to secure the inclusion of at least the following points in any statute which may require the induction of involuntary recall of dentists into the armed forces:

1. The law should not be extended more than two years, i.e., beyond June 30, 1955.
2. The present maximum age for the induction of dentists should be maintained at 51.
3. The national, state and local advisory committees to the Selective Service System should be retained and their authority in no way diminished. The Health Resources Advisory Committee should be given positive statutory authority with respect to insuring the exemption from military service of an adequate supply of health personnel to protect the health of the civilian population.
4. In determining assignments to a particular priority, credit should be given for service with an allied government in World War II and for service in World War II prior to entering an ASTP or V-12 course.

5. Maximum required service should not be more than 24 months, and provision should be made for the release, after not more than 17 months of service, for those who served 12 months or more subsequent to December 7, 1941, in the armed forces of the United States or of a country allied with the United States, ASTP or V-12 service excluded.
6. Persons who served and are discharged after June 25, 1950, should be excluded from further service except in time of war or national emergency hereinafter declared by the Congress, except where an individual has additional liability as a general registrant.
7. It should be possible, at the expiration of any period of active duty occurring after June 25, 1950, for any dentist who is not subject to the general draft law, to submit, and have accepted, his resignation from the armed services.
8. The \$100 per month special pay for dentists should be retained.
9. Adequate provision should be made for the deferment of persons essential to the community or to the nation, and for those who are disabled or under severe personal hardship which would be aggravated by service.
10. Newly commissioned dentists should be assigned grades commensurate with their professional experience. Veterans recalled through Selective Service processes, or as reserves, should be given higher rank than that held in World War II, if justified by their subsequent professional experience.
11. The Association shall seek to have included in any revision a directive from the Congress which will insure the freedom from induction by Selective Service process or as a reserve officer, any member of a faculty of a dental school who can not be replaced and whose induction would have the effect of (1) diminishing the quality of instruction offered; (2) seriously affecting the administrative or research program of the institution; (3) diminishing the number of students who could be offered adequate courses of instruction.
12. The Association shall seek to have retained in any revision of Public Law 779, a specific directive or, if that is not possible, an expression of policy, to indicate that it is the intention of the Congress to defer a sufficient number of individuals at the college level in order to provide a reservoir for the procurement of future students in school of dentistry, medicine, veterinary medicine and the like.

Under date of April 10, 1952, the Council reported that its Secretary, Mr. Garvey, spent the week of March 22nd, in Washington, during which time, he visited thirty-five members of the Armed Services Committee,

and presented the Association's policy as adopted by the Board of Trustees for their consideration with respect to the new draft bill. From these conversations, he gleaned that members of the committee were generally favorable to the Association's proposals, but there might be considerable opposition to the extension of the \$100 per month additional pay.

Following a second conference with the representative of the National Casualty Company, the Board of Trustees adopted the following resolution with respect to certain provision in the the policy now being sold by the company.

RESOLVED, that the following steps be authorized in connection with the insurance program:

1. Request broker to inform all impaired risks that they have right to re-apply for coverage when plan is qualified in the individual state or nationally;
2. Publicize the fact that qualification of the program, by state or nation, is made on the basis of total application, impaired and unimpaired;
3. Instruct Insurance Trustee to press for another enrollment plan as soon as possible and advise Board of Trustees at annual session;
4. Request broker to seek amendment of contract to permit members applying before age 65 to obtain coverage when plan is qualified even though he has then passed age 65.

DR. JOHN: Again I want to say to all of you men that I deeply appreciate your support in my activities as your Trustee.

PRESIDENT CURRENT: Thank you, Dr. John.

We have learned to love this man. I do not know what we shall do down here if he ever quits coming. I hope he never does.

Dr. Henry Clark, please stand up.

Dr. Clark, this society has already recognized you, but, we are honored and we are deeply indebted to you for coming here. Dr. Clark is Director of the Division of Health Affairs at the University, and he is a very, very busy man. We are really honored by his coming. Thank you, Dr. Clark.

This program is running within three minutes of the time scheduled. I do not believe we usually run closer than that.

The Chair recognizes Dr. LeRoy Pridgen.

DR. PRIDGEN: Mr. President, Fellow Members of the North Carolina Dental Society: It is a distinct honor for me to have the privilege of pre-

senting to you this morning one of dentistry's truly outstanding men. His many contributions to the profession have been varied and have ranged over a period of some thirty-five years.

To mention only a few, they have included such things as outstanding service on the American Dental Association's Council on Dental Education and in the American Association of Dental Schools.

He is a Dental Trustee of the American Dental Association. His leadership has been outstanding in the American Association of Orthodontists. At the present time he is one of the outstanding deans of this country, and is the present Dean of Washington University, School of Dentistry. I am sure that all of us feel honored by his presence with us this morning.

It is my happy privilege to present to you our President of the American Dental Association, Dr. Otto Brandhorst. (The audience rose and applauded.)

DR. O. W. BRANDHORST: Mr. President, Guests, Members of the North Carolina Dental Association, Ladies and Gentlemen: It is indeed a pleasure to bring you the Greetings of the American Dental Association on this occasion.

As you are well aware, the American Dental Association looks to such organizations as this one because it is at this level that much of the work which carries dentistry forward is done. Therefore, the Board of Trustees and the House of Delegates provide that the President should attend as many of these meetings as possible during his year in office. And so it is that I come to you, to bring you their Greetings and to tell you how happy I am to be here on this occasion.

I note from your Program that you are, at this time, conducting your ninety-seventh year of activity. This is of special interest to me, because I believe this probably represents the oldest of the organizations where I have appeared, with perhaps the exception of Michigan. I believe that the State of Michigan is just a few months older than perhaps you are. Be that as it may, the fact that you have served over so many years indicates your particular interest in the dental profession and your desire to carry the good work forward.

This morning I should like to bring to your attention a few things I picked up as I went over the country—trends if we may call them that. I want to point out to you, or at least leave with you a thought with regard to these trends, that might be worth thinking about as you deliberate, and as you go back to your offices later.

Some time ago Willard Fleming, Dean of the Dental School of California, outlined rather nicely, I thought, the road over which we have traveled these many years. There, I think, in terms of the ninety-seven years that I have just referred to, he outlined this as an early period of

the beginning, one of extraction, where we thought simply in terms of the removal of teeth. This period then was followed by a need for the replacement of those lost parts and the effort in that direction.

As such things as these came into the picture, we came up with the thought that perhaps in the mouth there might be some infections that should be cleared up. So, we went through that period called the "infection" era." Subsequent to that we entered upon an effort to control the conditions developing the oral cavity, and after that, we sought their prevention. And here is where we find ourselves today.

The road ahead is one in which we are particularly interested. In speaking of these trends, I hope they may point out at least some things on the road ahead.

These trends are the results of a growing-up process through which we have gone. Not many years ago we were quite concerned about putting our best foot forward and impressing the public with the fact that we were partners in their lifetime. Today we find ourselves recognized as an important segment of the Nation's health service. Here we find ourselves with many responsibilities that previously we did not recognize. Today, we must recognize there is a greater consciousness of the importance of dentistry on the part of the public. Ours must be, then, an awakening, an awareness, of the broader public desire for more services and then, our responsibilities to meet this demand.

In speaking of these trends, let me suggest that you think of them as they pertain to three general areas, not that that includes all of them, but for our purpose at the moment, I think these three will be sufficient.

First, the group that will be interested in trends in health services will be the Government, as I have listed them. We know and we all feel that the Government should be interested in the health of the citizens of this country. The question in our minds is, to what extent, and how does it affect our relationship to this?

Early last fall, because of the situation that was developing, namely, the possibility of a change in the Administration in this country, we felt this might be a good time, perhaps an ideal time, to go forward and attempt to find out what the thinking was in governmental areas. And so, much effort has been put in during the past several months toward making contacts with groups, with individuals, to try to find out their thinking in terms of our particular problem, dental health.

In the course of things, we had conferences with Mrs. Hobby, the Rockefeller Committee, the various services, and many others including, about two weeks ago, a conference with President Eisenhower himself. I want to say to you that it was the most inspiring thing to me to find the willingness with which these persons, these groups, would sit down with us to discuss the dental health problem. They were very much interested in our

point of view. We were interested in theirs. Even though we might not join, on each of these occasions, in our points of view, there was always a feeling that they wanted to know more about our particular relationships and our feelings in the matter. We in turn developed that same idea that if we could sit down and discuss these problems one with the other, much good could come therefrom.

I feel these efforts that have been put forward are going to pay big dividends in the future.

The second group that I think is interested in trends and health matters will be the public, the recipients of our services. Here, too, we have made an effort to find out what their thinking might be.

When we thought of groups of this kind, we immediately thought in terms of the organized groups, the labor groups. Therefore, it was our privilege to call upon them in their central offices in Washington and invite them to a conference which we held on April 13, in the Central Office in Chicago. At that conference we had representatives from the CIO, the Mine Workers, and many of the other organized groups. This apparently, according to their comment, was something quite unusual. They felt that here might be an opportunity to really talk about mutual problems. We assured them our purpose was strictly one of wanting to get better acquainted and to discuss with them basic philosophies in the areas that concerned both groups.

As a result of that conference I believe we have established again a group relationship for the future where we can sit down and discuss with these people the problems which are of concern to them and certainly of concern to us.

I think we will agree, while we may hear of an effort now and then over the country toward increasing wages these days, that wage increases are probably not in the trend of things at the moment. In all probability the pressure will be placed in another area, namely, in what they term "fringe" benefits. It happens that in the fringe benefits they look rather definitely at health services. Health services, presumably, in their estimation, is going to be the major thing in premium benefits. Personally, and I am sure you agree with me, I would prefer not to have health services and certainly not dental services, made fringe benefits. I should like to see them out in the open, valued on the basis of their real value, and dealt with on that basis. I believe from these conferences we have held, that we have made a start toward creating a better understanding of what we have to offer, the problems that are involved, and a feeling of cooperation on the part of these groups in turn.

The third group that is especially concerned with regard to trends is the profession itself, we who deliver the services.

I am sure, as we think over the major problems and the developments



Junior A.D.A. members from the University of North Carolina

that will probably take place, one of the things we recognize clearly is the possibility that when certain things go forward, there may be some change in the type of practice from that conducted today. This comes about through the fact that we must find ways and means of organizing ourselves for a broader service. I think we all recognize that the trend today, in all health service areas, is toward prevention rather than prolonged treatment. Also, in an effort to meet this situation we are going to attempt to reorganize our office effort and make a broader and better use of the auxiliary personnel. This points toward a change in the type of practice we now have.

I think, too, we need to recognize the fact that for quite a number of years much money has been spent through the Hill-Burton Bill on the development of health centers, not in one area or the other, but over the entire United States, in every state in the Union, so that the development of these health centers might readily point to some trends in the future. They may become the distributing centers of health, particularly in the rural areas. We need to watch that development quite carefully.

Probably one of the greatest developments that has taken place in our

offices has been the development toward service for children. I believe that this particular service may definitely influence the future practice of our profession. That is as it should be, because it ties in with this preventive and control program we are facing today. Certainly we all recognize the fact that this is the era of control and prevention.

Straws in the wind might indicate certain directions in which things might be going. I am sure, during your meeting here, you are going to hear more from the Director of the Veterans Administration Program with regard to what is happening in that area. If we picked up some of the things that are quite evident, we can see that perhaps here too there might be a trend toward a change in the present conduct of our practice.

Some days ago I picked up these statements. I am sure Dr. Fauber will give you the same statements subsequently. Once service connections have been established in the Veterans Administration, the Government provides continuing care at Federal expense. Of the many millions of applications that have been presented, not nearly all of them have been processed, but at the present time, according to this statement when I picked it up, 2½ million were under treatment. Nearly 62,000 dentists were participating in the home care program of the Veterans Administration.

I am sure that in this picture again, if we think in terms of the possibility of a real preventive program, we can see the possibility of helping this Veterans program materially, not as of this day or this year, but in the future, if we can apply the real preventive measures toward reducing the accumulation of that neglect in the adult.

I am sure we all admit we are in an era where we have to think in terms of military service for the professional groups as well as young men and women. We all recognize that as of now, Congress is about to consider the extension of the Physician-Dentist Draft Law, known as 779. There is a new number, but the 779 sticks with me better than the new number, so I will just use it as a continuation of the present 779.

When the Board of Trustees met in February, they were presented with certain recommendations from the Council on Legislation and the Federal Military Services, recommending that we support certain basic points with regard to the proposed new law, or to the continuation of the present 779 in amended fashion. The Board of Trustees accepted these recommendations and moved to support them. I think probably the best thing I can do to give you the latest on that is to read from a summary that was made by someone at the Federal Government level, and give you what I think is the latest information with regard to this particular law.

This does not include quite all the points that are supported by the Board of Trustees. Some of these points are supported broadly in the material that precedes the summary. I shall refer to several of those afterwards. This summary, however, gives you basically the present setup

on this particular law. This was the result of the House hearing on the law. I am sure Dr. Jones and some others know more about it than I do. I am sure he was up there at the time testifying.

I understand from this information I bring you, as of Friday of last week when I spoke with Senator Hunt, the Senate is now going to have a hearing. At one time they thought they might accept the House hearing report, but they are going to have a hearing. It may be in progress this week; I am not sure. I shall make a further statement on what Senator Hunt told me about that after I read you this summary.

There are ten categories that are covered in this summary.

1. It categorically prohibits the induction or order to active duty under the Doctor's Draft Law of any doctor who has completed twenty-one months of active duty, or more, since September 16, 1940.

2. It limits the new period of active duty to seventeen months for any doctor who has previously completed a period of twelve months, or more, of active duty since September 16, 1940.

3. With certain exceptions, it requires a termination of doctors' commissions as a result of the operation of the Doctors' Draft Law.

4. It permits reserve doctors not otherwise required to register to resign their commissions after they have been recalled under the provisions of existing law or the Doctors' Draft Law.

5. It permits the commissioning of aliens so that they may serve as doctors in the commission status.

6. It credits service in the Armed Forces prior to obtaining medical and dental education to be counted as active duty for all purposes.

7. It permits the service to be counted for those persons who served in the Armed Forces in those countries allied with the United States, prior to September 2, 1945.

8. It requires the discharge or release to inactive duty of persons who would not have been ordered to active duty or inducted had the provisions of the proposed law been in effect at the time of their order to active duty or induction.

9. It reduces from twenty-one months to eighteen months the length of service required to qualify for Priority 4, for doctors who were educated at Government expense during World War II, and who served on active duty for a period of ninety days or more following completion of their education.

10. It permits the doctors to be ordered to active duty as Reserve doctors. The authority to order such doctors to active duty, together with the authority to induct doctors, will expire July 1, 1955.

In other words, the law is being extended roughly for two years, to 1955.

In another portion of the general statement, it indicates that the State Medical Advisory Committee should take cognizance of the fact that they need to protect the dental schools and the dental teachers, and give deferment to them so that the production, the turning out of these trained persons, will continue without interruption. That infers, also, a point that was made by the Council and the Board of Trustees: that there must be provided a sufficient pool of students so that these institutions can be kept at full capacity.

One point that has not been brought forward in this summary has to do with the \$100 per month additional pay for these men who are being brought into the Service. In fact, there is pending, I think, a bill that would provide that, separate from this extension of 779. In my discussion with Senator Hunt on Friday, he indicated that after due consideration, they had decided it would be better to bring it into this bill and attach it to this, rather than as a separate bill. Somehow they sensed certain delays that could very easily come up if it were not done this way. He proposes to sit in on these hearings and to bring it forward as an amendment to the law, including it in the law that is now being considered.

That is information I had from Senator Hunt on the Friday morning just passed.

We have, then, this trend toward some military service on the part of the professional groups. There is no way that we can skirt that. We need to accept it as a part of our problem at present, and I am sure for years to come.

I am sure all of you are acquainted with the fact that we have certain responsibilities in civilian defense. I want to urge upon you to give due consideration to your responsibilities in your communities in respect to civilian defense. We cannot overlook it. We accept it and adjust ourselves accordingly.

Each of these eras that Fleming referred to, as I mentioned earlier, has brought with it its own problems and many new developments. At least one area, however, is common to all of these eras, and that is our dental education base, the base upon which we stand. Today technology and basic sciences are being interwoven in the arts and science of dentistry to produce a public servant trained to meet the biological as well as the technological requirements of the dental health service. This has meant that we have had to broaden the base upon which we were building.

If we add to this the problem of dental research which must accompany any forward movement, in particular when it deals with prevention and control, we find that while we have a rather broad base on which we are now building, we also have a very costly base that has been established.

I want you to think in terms, just briefly, of the type of individual who enters the dental school today. Compare it with years ago, when anyone could find a place in a dental school if he wanted to go into the field of dentistry: We find today the individual is being advised at the high school level as to where he might best fit in the overall program of our Nation's activities. Then, as that individual moves forward to the university level, here again you find many people prepared to advise him. The dental school sets up certain criteria based on what that group feels is necessary in the way of a background to carry the load in the school of dentistry in its training program.

Then we come forward and want to make sure that this individual who is being trained can meet the technological requirements. We try to find that out, as well as his general attitude toward the biological aspects, by giving him aptitude tests.

Therefore, by the time the student enters the dental school, we find he has been screened and screened and screened. We should, therefore, have a product, if he survives the tests, that is quite superior to the average person in a community. His education should be quite superior as to what was given us, these of us who went through the dental schools years ago. I pay tribute here to the older men who recognized this development and tried to give encouragement to these young men to come in and pick up the jobs which they have been attempting to carry.

A survey was made a short time ago by the United States Public Health Service and the Council on Dental Education with respect to the cost of dental education. I want to give you just a few figures here.

This survey of the cost of dental education indicated that for that given year there was a definite need for something like forty-three million dollars for the expansion of the facilities of dental schools of this country. It was not toward greater numbers, but rather to relieve the congestion in the schools at the present time. When we think in terms of dental research programs of the dental profession, I think we all wonder how we have been able to do so much with so little. The next thing that comes to my mind is, I wonder what we could do if we had real facilities with which to do the work?

It was also indicated that the total income for all of the dental schools as of that year, for the year, was something like sixteen million dollars. However, this income, which was tuition, clinic fees, and all earmarked funds for dentistry, was still eight million dollars short of paying the total cost of dental education for that year.

This means, then, that we are in a deficit spending program on the whole. We need, then, to think in terms of finding funds to support this program, just as medicine had done years ago. We have to find ways and means of channeling more funds toward this end. I commend your group for the effort you are putting in your Dental Foundation. If we can

develop such plans over the country, I think we can beat this situation quite well.

It is of interest that in this effort we are actually, over the past ten or twelve years, producing roughly 50 per cent more dental graduates than we were prior to that time. This educational program of American dentistry is recognized the world over as the best, even though it is quite expensive. However, it is our first line of defense and we must find ways and means of channeling these funds to its support.

Can we expect the public to support our program? My answer is yes, provided we recognize certain basic principles and proceed in the direction indicated. The basic principles, briefly, that we recognize are that we are serving the public and all of our effort must be made toward bettering and extending that service.

How can we meet this responsibility? There are many ways, but I am only going to mention two for your consideration at this time.

First of all, as educated citizens of a community, we must immediately recognize that we have a job in the community beyond merely entering dental service. We must recognize that we are a part of the community, as a highly trained person, and as such a highly trained person, we must recognize that there are many in the community who look to us for guidance in evaluating these trends that I have been talking about, among others that pertain to other areas than health services themselves.

We must take leadership as citizens in the community. In doing so we must come forward, not wait until we are pulled into a situation to meet it, but show our leadership in the community, and especially so when it comes to things relating to health.

The best example I can give you in this respect is the opportunity we have in supporting the program of fluoridation. You have already received from several sources—and we have percentages here—information in regard to what is actually going on over the country. This program is gaining momentum! More power to you as a group in carrying it forward in your particular state!

I do want to comment briefly on some of the negative reports that we hear occasionally. In other words, the opposition to the movement. I simply want to point out here that this is a little different from the usual method that has been pursued in bringing forward programs of this kind.

Normally we would expect that we would do research in the laboratory over a period of time determining what might best fit a program that we had. We would study the thing from all angles. We would experiment on animals, usually, and then gradually on individuals. In this fluoridation program we have approached it from an entirely different angle, and if it is viewed in that way, I think it answers all the questions the opposition brings forward. One of the basic questions that is always brought forward

is, "What is going to happen over a period of time to those individuals who use fluoridated water?" If you think back to how our fluoridation program developed, we can summarize it very quickly in this way:

What we really did was to evaluate what nature had provided, that is, the greatest experiment of nature. A great many people, more than 1100 communities, have been drinking fluoridated water over many years. No effects have been found in the examination of those individuals except mottled enamel. Our purpose here is to try to control the amount of fluorides in the water to prevent the mottled enamel. Otherwise, the program over the years as applied in many areas, through nature, has only been beneficial.

That should answer all opposition: we are merely interpreting nature's provisions and calling it to the attention of the public for the good of the children of the present and the adults of the future.

Another area in which we can do a real service in the community, and one that will help our relationship with the public, is to keep them advised with regard to some of the things that are foisted upon them, certain tooth-pastes and mouth washes and the claims thereto. The more we can keep the public informed in regard to these matters, the greater will be their appreciation of our effort in their behalf.

The second general area that I want to mention here that will help us with our public relations would be if we recognized the fact that we do need to expand our services, whether it be remedial or whether it be preventive. We do need to expand these services and we do need to take leadership in our communities to develop plans for that purpose. We must not wait until we are forced to evaluate what some other group has brought forward.

If we approach this in this way, we can obtain the respect of the public, and as we do that, they will support us in our program of need, our program to support education and research, because it is of interest to them basically.

What are we doing in regard to meeting some of these things? Well, first of all, let me outline to you a few of the problems that we will face, some of which I have covered.

We need to broaden our understanding of today's social problems and present-day trends. I think that is the most important thing in this picture—the need to evaluate these things and understand them.

We need to cultivate a broader public relations program.

We need to find ways and means of offsetting Government plans. Although in this area at the present time we have a bit of a breathing spell, we must not be complacent, we must move forward.

Much of what I have said dovetails with what your President said to you this morning. I am glad to lend my support to many of his statements.

We need to secure for ourselves the privilege of relieving pain. I should like to explain that statement just a bit because it is one that I have thought a great deal about. If the situation ever develops where we lose the privilege of relieving some pain or all pain for an individual, we lose ourselves as a profession. That privilege we must retain in all of our relations in the future.

We need to find ways and means of extending oral health services to greater numbers.

We need to find a proper balance between military demands and civilian demands as they relate to the dental manpower situation.

We need to make a thorough evaluation of training facilities and needs, with due consideration to future needs, present teaching staffs, and the effectiveness of a preventive program of large proportions.

We need to find ways and means for financial support of general education.

We need to find funds for fellowships and scholarships to offset the increasing cost of dental education for the students.

We need to find ways and means of supporting dental research.

We need to expand our control, in this expansion.

We need to develop financing plans to meet the costs.

We need to expand our dental manpower facilities.

We need to survey office management, for better services more economically rendered.

We need to develop a judicious use of the auxiliary services.

We need to control, yet encourage, the dental laboratory.

We need to encourage the services in the rural areas.

We need to determine the most effective types of practice under various conditions.

We need to control specialization in dentistry.

We need to take leadership in local health conferences.

We need to study further plans for Social Security for the profession.

We need to determine the proper balance between the service rendered and charges made for our services.

How are we attempting to meet these situations? I am sure you are all familiar with the structure of the American Dental Association on down to the local areas. The very fact is that we have at the national level quite a number of councils that are working day in and day out on problems, many of them covered in what I have referred to as being necessary in the way of activity, even as of now, and for the future.

Here I want to pay my tribute to the many councils and committees that are working not only at the national level, but at the local level, your level here, and the efforts which these individuals render in trying to meet these many problems that we face. I have not listed very many of them, but enough so that you can see there is much work to be done.

I want to pay tribute, too, to the personnel of the central office. I have never seen a group of persons who are so willing to go out to do the things for you as an officer, or for you as an individual, or at the request of councils, as the group in the central office. I have had occasion to go into the office many times and they are always busy, but always willing to help with the problem that you present. I would commend to you a broad appreciation of the efforts that are being put forward by the staff in the central office, by the councils at the national level as well as the activities at your level.

It is through the cooperation between your group at this level, the local level, and the national, that we can move forward with the greatest rapidity in these areas which I have mentioned. It is not enough that we make these studies at the national level and simply bring in basic information which may or may not be applicable at the local level. You need to take the studies that are being made at the national level in the laboratory of the local areas and test them, to determine how they fit into your particular requirements.

I am sure you will agree that a plan which could be developed at the national level which might be quite serviceable in some of the larger areas such as Chicago or Baltimore or areas of that kind, might not work at all in a rural area or even smaller urban areas. We need, therefore, to take the material that is developed at the national level and test it. Then, as you test it and find how or what part of it is applicable to your area, if you will bring those returns back to the central office, we shall then have, when it is necessary to call for them, information for other areas similar to yours, where a program that you might suggest could be successfully carried forward.

If we can work out this cooperative effort, then we are well on the way to meeting requirements that we must meet, if we are to survive in the future.

Sometimes I hear comments with regard to the danger of bigness, overdeveloping our areas in the national office, or even many times at state levels. I am not at all concerned about bigness in that respect, or overdevelopment. I like to think in terms of a statement that was made by Mr. Lilienthal some months ago. I think you all recognize Mr. Lilienthal might be one who might oppose bigness, because of his relationship with the past administration. Mr. Lilienthal commented briefly that we need have no fear of bigness, provided we make bigness work for us. I feel the same with regard to bigness of organizing at the state or the national level in our own areas. Bigness does not frighten me in the least. My feeling is that it

could still be bigger and better, but let us make sure in doing so that we continue to have this bigness work for us.

With that message, I leave you and hope you will have a good meeting. Every indication is that you are already having that. It is my hope that as we move forward together to meet these problems we will have joy in serving the public.

Thank you. (Prolonged applause.)

PRESIDENT CURRENT: Dr. Brandhorst, we are greatly benefited by your very able address. We are greatly indebted to you. We thank you from the bottom of our hearts for your coming, and we hope you will stay with us and have a good time during the remainder of the activities of our convention.

The Chair will recognize Dr. Wilbert J. Jackson.

DR. WILBERT J. JACKSON: Members of the North Carolina Dental Society, Ladies and Gentlemen: I am happy to present at this time the Secretary of the American Council on Dental Education, my friend, Dr. Shailer Peterson, who will address you. (Applause.)

DR. SHAILER PETERSON: Mr. Chairman, Members of the State Society, Officers of the Association—and I will not say a word about my boss, the President of the American Dental Association—and Friends of the Society: Like Dr. Brandhorst I note that you are celebrating your ninety-seventh anniversary, but we have other reasons for being in this particular part of the state at this time. I would have come down to your State Association meeting, however, if for no other reason than to meet Dr. Wilbert Jackson, who was formerly one of my bosses when he was on the Council of Dental Education. He and I visited many dental schools together, and we are now in the process of visiting the Dental School that you are responsible for having started. In fact, two days following your meeting here, a committee from the Council, and myself, will view the institution, the enterprise, that you have long wished for and that you are now seeing for the first time in complete form and operation.

I should like to talk to you today along several different lines. I should like to mention some of the responsibilities that I think you, as a dental society, still owe to this brainchild of yours, the Dental School. I should like to talk a little bit about the responsibility that I believe the Dental School has to you. I should also like to point out some of the activities with which I am more directly connected, namely, with the American Council on Dental Education, the accredited body of your profession, working through the American Dental Association.

HOW DENTAL EDUCATION SERVES THE PROFESSION

It is indeed a pleasure to be selected to appear on your program, to be present at your Ninety-Seventh Anniversary Meeting, and to be asked to speak to you on the important topic of "How Dental Education Serves the

Profession." It is obvious to me, as it must be to others both in and out of the profession, that North Carolina's dentists not only recognize the importance of dental education to the profession—both nationally and locally—but have done and are doing something about it. The enthusiasm of the society has been noted by your interest in studying the needs and the requirements of the state and of this area some years ago by leaders in the field of dental education; then you decided what must be done—which led to the establishment of the newest dental school in the United States, bringing the present number of operating schools to 42, helping to bring the enrollment in dental schools to a high point, and bringing to the qualified men who aspire to study dentistry from North Carolina a better opportunity.

My being here is also due to the State Speakers Program of the American Dental Association plus the fact that the dates of your meeting coincide with previous plans to visit your state and to see first hand the results of this state's enthusiasm for creating what is expected to be, a leading dental school in this country. I would also like to speak not only about the importance of your decision to take an active role in the field of dental education, but also of your responsibility to continue your active participation and your support to this project which could never have come to pass without you and your leaders. I would also like to speak about the responsibility of a dental school to the profession on both the national and the state basis. I would also like to mention something about the work and the responsibilities of the profession's accrediting agency, the Council on Dental Education, of which I am secretary. One of your own members, Dr. Wilbert Jackson, was a member of this Council for many years and while you have been interested in its activities, you may not have realized the leadership that this Council has exercised in the field of education and in the larger field of accreditation.

We have been in almost constant touch with the work that you and your school leaders have been doing in this state and while our visit to the school in a few days will be the first, you should know that the school which you have helped to create has been in constant touch with us and is participating in each of the activities that is sponsored by the Council. Also, the state licensure board in your state has been most cooperative and helpful to the Council in its study of dental education needs and in the study of dental practices.

Dental education to many persons today brings to mind only dental school, dental school faculties, dental school clinics, textbooks, and dental school courses of study. Dental education is bigger than that. The United States has leadership in the field of dentistry and in the field of medicine just as it has leadership in so many other fields of endeavor and in so many other activities. This leadership in the field of dentistry has not only come from the fact that this nation has the leading and best dental school and best dental educational curricula in the world, but also because the dentists in this nation do not have a feeling of self-confidence and self-sufficiency when they complete the training for their degree.

The U.S. dentists, as represented by those in North Carolina, realize the importance of self-education. There is no dentist who doesn't increase his fund of knowledge, his skill, his experience and his competence after he receives his degree and after he receives his license to practice. You receive this additional training in a multitude of ways. You do it by additional study which is assisted by the journals that you read, the meetings that you attend, and through the new texts or reference books that you buy. You also do it by observation, study, and experiment every day in your office or laboratory. You see unusual cases and learn facts that you cannot find in your textbooks; you develop technics that were unknown to your teachers in dental school, and you exchange ideas and views with your colleagues. All of these things can be termed dental education. Then there are more formal ways of acquiring additional knowledge and understanding. There are the table clinics, the essays, the film programs, and a host of other programs given at your state and national meetings. There are your short-refresher courses given at dental schools and at other recognized institutions as well as the graduate and postgraduate courses given for the benefit of those who can spare more time and wish a greater concentration of added experience. There are the experience type of programs given by one dentist to a group of dentists or to an individual as a preceptorship.

There are many ways of securing added knowledge and experience. In the last few years alone, the number of those who have registered for graduate and postgraduate courses has doubled and it will probably continue to double every two or three years. Last year there were about five thousand dentists enrolled in graduate and postgraduate courses in the dental schools, many more in other recognized institutions and many more were enrolled as interns, residents, and fellows in hospitals and schools throughout the nation. The number of courses available has increased almost by astronomical proportions so that now the menu of courses is found both attractive and useful to everyone regardless of his needs, his interests and his appetite for study and work.

Dentistry, as a profession, is growing so rapidly that it is difficult to keep abreast of its rapid progress from even a descriptive point of view. It has only been seventeen years that the four-year course of study with the two years of required pre-dental training has been in use. It has only been 27 years that work beyond high school was required of those seeking admission to dental schools. Dental education, as reflected by the programs in our dental schools across the country serves as a good barometer for the progress and rapid growth of the profession, and for the rapid growth in the dental service that is being rendered to the public.

There are some who believe that this rapid growth is dangerous and that it may get out of hand. There are some who probably would wish to slow down the change wondering if it is truly progress. Obviously not all change is progress, but in the case of dental education you may be assured that this is a true sign of progress. Some wonder where the dental education programs will end, or at least where they will be in

another 17 or 27 years. Some think that more added years will be required and that the added time would surely threaten the profession and the service to the public. No one has a crystal ball to tell us exactly the true answer to this question but those of us who have viewed the problem from many angles and who are constantly visiting the educational programs in the nation have some ideas on the subject. There will continue to be new concepts, new theories, new technics, and new methods, just as there has been in the past. Also, there are continuing to be new methods of education, improved techniques of instruction, and faster methods of imparting information and skills to students. It is extremely doubtful that the four year dental education program required for the dental degree will ever be increased beyond the four years, and the more efficient educational programs by progressive educators will help this to be true. There will continue to be a growth of additional courses to be taken by the graduate dentists and some of the material that is now taught in these, will be included in the undergraduate programs. Those dentists who seek special training to become eligible for the specialty board will continue to take graduate, postgraduate, internship and residency training but it is extremely doubtful that the state boards will require this training for those who wish to become licensed for general practice. One of the reasons that this seems true is that the boards also know that the practicing dentist will continue to educate himself and can be depended upon to take advantage of the increasing number of programs designed to help him further his knowledge and skill. This added training for special purposes does not have to be forced upon him.

We have already mentioned the fact that dental education has as its purpose, service to the public. Dental education makes it possible for the dentist to provide more and better service to the public. Considerable attention has been given to means of increasing the amount of service, particularly in certain areas of the country where there are more persons desiring dental service than there are dentists to provide it. Some have thought this could be done only by a rapid increase in the number of dental schools. You who have studied this problem know that this is only part of the answer. There are not enough qualified dental school teachers to supply faculties for a sizable increase in the number of dental schools. In fact there are hardly enough teachers today to provide even the minimum number required in the existing dental schools, all of which could use many more.

A more satisfactory answer for the moment is to provide more properly and adequately trained auxiliary personnel. Your own state has recognized this as a logical and practical solution for your own school plans to start a program for training dental hygienists. Within the last year three new schools of this type have been started, bringing the present number of programs to 29. Within the last few years, the number of dental hygiene graduates has doubled and soon there will be about one thousand graduating each year.

These programs are of particular interest to the Council on Dental

Education at the moment for we have just completed the first nation-wide inspection of these institutions whose programs are in complete operation and two days before coming to your meeting, the Council took formal action on the list of schools which will soon be released to announce those which are accredited. When we visit your dental school in a few days we shall also examine the plans that are being made for your dental hygiene program so that we may give to your educational leaders the benefit of our observations and experience to help guarantee that your program will be acceptable on a national level.

While some of the training programs for dental hygienists are conducted in recognized educational institutions that are not a part of a dental school, many of the dental schools are giving serious attention to enlarging their programs so as to train auxiliary personnel. It is particularly interesting to note that these programs in the dental schools are not only for the direct benefit of providing a reservoir of dental hygienists but also to train the dental students in office and laboratory practices that will make the most effective and efficient use of these auxiliary aids. This, in a sense, is giving further emphasis to the topic of dental economics and practice-management. Both the dental student and the dental hygienist should be familiar with the responsibilities and functions of each. In some of the schools that we have visited and in the states where this problem has been discussed it is obvious that different duties and different functions are emphasized. One must realize that dental schools too place different emphasis on various parts of the curriculum and that it takes time for certain of the aims and objectives to become more nearly uniform even though we would never want to standardize them or straight-jacket them completely. Therefore, it is only natural that the function of a dental hygienist and the relative importance that should be placed on dental health education, chair-side assisting, and prophylaxis should be expected to vary some at this time and it does. When we have had schools for the training of dental hygienists as long as we have had dental schools, and we have had dental schools only for 113 years, then we may rightfully expect the duties and functions of the dental hygienist in the dental health program to be understood better. So many of the facts that we observe about the present status of dentistry and particularly of dental education, emphasizes the fact that we are concerned with a rapidly growing organism whose life and whose progressiveness continues to amaze those of us who study its symptoms in an effort to diagnose its condition.

Several times I have referred to the Council on Dental Education and to the fact that it counsels and makes recommendations. While this agency is known as an accrediting agency and is looked to by all of the state boards, by governmental agencies, and by other agencies in this country and elsewhere for its listings and evaluations of schools, it must be emphasized that the Council is not a policing agency. It works for the profession and for the public, but it accomplishes its function by its counseling and advising and in that way eliminates much of the activity that is usually thought of as policing. You can depend upon the fact

that when you hear that a dental school or a dental hygiene school has been accredited by the Council, it means that the program has been analyzed very carefully and critically and that the institution has been called upon to explain and justify very carefully and in a detailed manner any part or aspect of its program that may appear unusual or different and from what may have been found to be more commonplace on a national basis.

The Council does not regiment, does not straight-jacket the school, its methods, or its curriculum. The Council is primarily interested in a good, solid, overall program operating on a sound education basis that produces qualified dental graduates who will be able to render competent dental care to the public. We realize that there is more than one way in which a good job can be done and we encourage schools and their administrators and their faculties to explore new methods when it seems likely that the new methods may produce good results and when the school is willing to enter these exploratory fields with the open mind of a research worker evaluating every step. Like the research worker, the school and the staff must recognize from the outset that they must be willing to make other changes when these are indicated from the results of the experiment. The Council aids in many of these individual school experiments and some experiments are conducted with groups of schools or on a national basis. For example, we have thousands of dollars helping the profession and this includes the dentists of North Carolina by assisting all of the dental schools in the country to study their admission procedures and help them to improve their selection methods. Through this program, an aptitude testing experiment was developed which has now grown to large proportions. This program has made it possible for schools to decrease the number of failing students to an absolute minimum and in that way all of the classes are operating at nearly maximum efficiency. It is obvious that when clinics, laboratories, and class rooms are nearly empty or when they have a number of empty chairs, the program is not operating efficiently and therefore, fewer graduates are being produced and the cost of the educational program is high. Without adequate selection methods the public and the profession are both losing and the taxpayers are wasting money.

Your school has cooperated in the aptitude testing program as it has with many other Council activities and projects. Before leaving the subject of admissions and aptitude tests, it should be mentioned that there continues to be a large reservoir of students who wish to study dentistry and enter a career of dentistry. There are at present nearly two applicants for every vacancy in our dental schools today. This large reservoir provides the schools with a good selection and they are thus able to admit the students who are most apt to make a success of dentistry and most apt to guarantee that dentistry will continue to advance and to progress. The dentists in the state as well as the dental schools and the Council must continue to acquaint the young students with the opportunities in dentistry so that this large reservoir of applicants will continue.

Your dental society, like the other dental societies across the nation expects changes to be made in the field of dental education. Changes are taking place and if you were to visit your dental school you will find that its program is much different in many respects than the schools of ten or fifteen years ago. Emphasis is being changed and the content of the courses is also changing. As Dr. Brandhorst has just pointed out, there is more emphasis now on preventive dentistry than ever before. There is also more emphasis on the relationship between the dental health and the physical health of the patient and more emphasis on dentistry for children. While the emphasis is being changed, this does not mean that less attention is being given to other important parts of the program. Equal attention is being given to restorative technics, but the method of teaching these has changed. Students are no longer required to repeat operations as many times for we know now that there is such a thing as "aimless repetition." The student should not be required to perform an operation 50 times if he can acquire all of the skill necessary in perhaps 20 times, thereby giving him time to pursue some other technic and enlarge his scope of learning. Also, more attention is being given dental research. Faculty members like the practitioner are more research minded and students in our schools are being given an insight into the importance of research hoping not only that they will continue their research when they get into practice, but also so that some may enter the field of research and the field of dental education.

Your dental school has an obligation to you, but you must not forget that it has an obligation to the nation and to the whole profession and to the other dental schools. There cannot be 42 separate and independent programs of formalized dental education or dentistry would lose its strength. The dental schools and their programs must be united and it is one of the responsibilities of the Council on Dental Education to assist in uniting and to assist in coordinating these 42 efforts. A new school that will start in Loma Linda, California this fall will be the forty-third to enter this cooperative program and another to start in West Virginia in the Fall of 1954 will be the forty-fourth in the big family of dental education. It is the responsibility of your dental educators to keep their fingers on the pulse of the state but also keep their eyes on the national picture and the special responsibilities of the school from that standpoint. Your new school will soon be giving the dentists in the state leadership in the area of refresher courses, graduate programs and postgraduate programs and while these must serve locally, they must serve nationally for it would be nationally wasteful if each school tried to have a smattering of everything. Even schools must specialize to a degree and perhaps it is more easily understandable if we were to say that they serve states first, then regions and finally the nation. Other schools in your region will help serve the graduate and postgraduate needs of you men and in that way the advanced offerings of these schools may be maintained at a very high level.

The dentists of North Carolina have in effect delegated certain responsibilities to their dental educators in the state in much the same way

that your society would delegate certain responsibilities to a committee. You should be interested and concerned that these committee members, for that is exactly what they are, report back on their successes and on the over-all project. You should also combine with your interest and with your support, a certain element of patience as you watch the growth of a new enterprise. Responsible committee members need your support, need your confidence, and need an element of freedom to plan and progress. As one who helps to direct the work of a Council which operates on a national basis, it is clear that one must view educational programs like one must view other projects, from a long range point of view, and not be misled or confused by individual items however important they sometimes may appear to be. This word of caution holds for both the items that may appear to be good and those which may appear to be bad. False security may often come from those who view only the one or two exceptionally fine features just as unfounded fears may result from those who attend only to the one or two items that are difficult to understand.

It is a pleasure to be able to address a group whose interest and concern about dental education is as apparent as it is in this group. It is extremely rare that we not only address the group responsible for dynamic action in the field of creating a new school, but even more rare to address the group two days before making an official visit to the institution which the group has made possible. Yes, we have been in close touch with many of the plans and many of the moves that have been made at your school, and I can say that I am looking forward to this visit with a great deal of anticipation and pleasure. I know some of your faculty members personally and I have a great deal of respect and admiration for the man who has been delegated with the responsibility and the authority to produce a top flight dental school on national standards. No job of this magnitude is without its problems and its worries. New schools, like old ones, need the support of all of you, and that is exactly why we in the Council feel it a privilege to work with men like you.

It has been good being with you and I hope that you will feel free to call upon me or upon any member of my Council at any time we may be of assistance to you. Thank you.

PRESIDENT CURRENT: Dr. Peterson, we are grateful to you for coming and bringing us this very informative and scholarly address. You have contributed much to our program. We hope you will stay here during the rest of our meeting and have an excellent time socially and professionally. Thank you.

I should like to call our attention to just one or two things before we go out to lunch.

We have election of officers tonight. A committee has been selected to take charge of it. The Secretary will take notice and turn over to these men the paraphernalia necessary to conduct the election. These men are Sam Bobbitt, P. B. Whittington, Jr., and LeRoy Pridgen.

We have, according to the records, one of the finest commercial exhibits that this Society has ever had. They have paid for the space that they occupy. I would urge you to go along and visit those exhibits and express your gratitude and appreciation to these commercial exhibitors.

I should also like for you people who have been so very faithful in attending these meetings to pass on to those who do not attend very well, a little suggestion about their faithfulness as well. We brought top-flight men here. They have come a long way. They have proven their ability. I want you to help, in your faithfulness, to create faithfulness in the attendance of the others. It will lend dignity to this whole Society.

Dr. Walker, do you have other announcements to make?

SECRETARY WALKER: No.

PRESIDENT CURRENT: We will stand adjourned for luncheon and we will assemble here at two o'clock this afternoon.

(The meeting adjourned at 12:30 o'clock p.m.)

GENERAL SESSION

Monday Afternoon, May 18, 1953

The meeting reconvened at 2:10 o'clock p.m., President Current presiding.

PRESIDENT CURRENT: You will please come to order. I presume, since the Secretary is not here at the moment, that we can start the meeting without him.

I recognize Dean John C. Brauer.

DEAN BRAUER: Mr. President, Members of the North Carolina Dental Society, and Guests: I feel very much privileged in having the opportunity to present to you a gentleman of distinction in the field of dental education and dental research. Those of you who follow the literature recognize the name of Volker as associated with very many of our research findings.

On Page 11 of your Program, you will find at least some of the accomplishments of Dr. Volker. You will find he has at least four degrees that are published and others that are not published. I find that Dr. Volker has been a dean at two different schools of dentistry. One was at Tufts University in Boston, and he is now the Dean at the University of Alabama, at Birmingham.

Although Dr. Volker looks relatively young (and I will say that he is, for his years, physiologically and otherwise) Dr. Volker has accomplished a great deal in his lifetime, both in the field of education and the field of research. I know of no one whom I would be more privileged to present than Dr. J. F. Volker of Birmingham.

Joe!

CAVITY MARGINS

DR. J. F. VOLKER: I am very pleased to be here. I should like to compliment the local Arrangements Committee who, it seems to me, has devised a sure way of getting a reasonably good attendance at a dental scientific session. That is to pick out what appears to me to be the hottest portion of the state and get the coolest room in that location. If that will not bring a dental audience together, I do not know of anything that will.

I noticed on the program that there was a period of an hour and a half that was allocated for this presentation of mine. I can assure you that I will not speak more than an hour. I used to have the habit of going on indefinitely until two things happened. One was the presentation of this watch last year by our first graduating class down at the University of Alabama. They told me that it was not only a token of their esteem, but it was also to help out the junior class and to see they got to their next class on time.

The other thing I think has affected my lecturing to students is a quotation I saw in a book of biochemistry not so long ago. It went something like this: No man can stand in front of a scientific audience and speak on a scientific subject for more than sixty minutes without saying more than he knows about that subject. Therefore, if I talk more than sixty minutes, I am definitely talking about things that I have only the slightest acquaintance with.

There is another thing that I have done, so I can put you at ease on this, too. I do not know the title of this talk, but I have listed a very broad and general topic. This topic deals with the physical and biological properties of filling materials. This of course is because the average essayist who is called upon to talk to a dental audience never likes to put himself in a hole. He likes to pick a broad subject, then after he thinks about it, to select a topic that is still within the original subject and is keeping within the original topic.

What I am going to talk about today is primarily the very limited area of the cavity margin.

For many years research workers have directed their attention to the physical and chemical properties of the dental hard tissues. Similarly, numerous researches have been carried out relative to the physical properties of restorative materials. Unfortunately, the area in which the tooth structure and the restorative material approximate one another, the cavity margin has not until recently received serious study.

It is important to remember that the three principal restorative dental materials, amalgam, silicate and acrylic resin are placed in the cavity in a plastic mass and after being adapted to the cavity wall undergo solidification. The latter process is attended by certain dimensional or setting changes. Obviously, these changes will either improve or impair

marginal adaptation. In the instance of amalgam, the material undergoes an initial setting expansion of three to thirteen microns per centimeter. Theoretically, this would mean that the filling-tooth structure relationship is improved. A reverse situation prevails in the case of the self-curing resins and the silicate cements. The former undergoes a setting shrinkage of six to eight per cent of its volume and the latter has a setting shrinkage of about two per cent. It is reasonable to anticipate that the filling-tooth structure relationship is adversely affected by this type of change since these would be an increase in size in the marginal crevice.

Subsequent to the initial setting changes alteration in marginal relationships may result from further dimensional changes in the restorative materials. If during tituration moisture has become incorporated into the amalgam, secondary expansion occurs. In many instances this results in the extrusion of the surface of the amalgam out of the cavity and destroys the tooth structure-restoration surface continuity. This is an undesirable situation because, theoretically at least, it makes for the accumulation of foodstuffs and bacteria in a most caries susceptible area. Unlike amalgam, which is virtually impermeable to fluids, the silicate and the self-curing resins are capable of water sorption. The magnitude of this reaction is best shown by research reports from the Bureau of Standards that the latter material may increase as much as 1.5% of the original volume within 24 hours after being exposed to an aqueous environment. Although these changes are not sufficient to compensate for the setting shrinkage, they result in considerable improvement in marginal adaptation.

Once the restoration has been placed and has undergone the changes enumerated above the most important influence on marginal adaptation is probably the repeated alteration in the temperature of the restored tooth that results from the alternate ingestion of hot and cold foodstuffs. It has been shown that the temperature of the ice cooled beverages is approximately 4 degrees centigrade and that of hot coffee is approximately 60 degrees centigrade. The drinking of the former will lower the temperature of the tooth to 9 degrees centigrade and the ingestion of the latter will elevate tooth temperature to 52 degrees centigrade. It is readily apparent that temperature changes of approximately 43 degrees centigrade can be produced in vital teeth. This becomes a most important consideration when we realize that tooth structure and restorative materials are entirely different substances and that they expand and contract completely independent of one another. The thermal coefficient of expansion of tooth structure is approximately 11 parts per million centigrade. The comparable figure for the self-curing resins is 81 parts per million centigrade. Similarly, silicate expands at the rate of 7.5 parts per million centigrade and the expansion of amalgam is of the magnitude of 25 parts per million centigrade. This means, of course, that as the temperature of the tooth undergoes changes the marginal area is profoundly altered. Depending upon the nature of the thermal change, the adaptation may be improved or impaired. Under certain conditions a

crevice of considerable size can, and does, develop and seepage of oral fluids results. Researches at the Bureau of Standards have amply demonstrated that these changes occur with all restorative materials but the self-curing resins are particularly deficient in this respect. Very possibly this phenomenon is of major importance in explaining these clinical conditions:

1. The re-occurrence of caries around margins.
2. The persistence of hypersensitivity of the dentin following the insertion of fillings.
3. Marginal discoloration.

Of considerable interest is the observation that marginal seepage or as it has been designated by some "percolation" decreases with the passage of time and may ultimately, in the case of amalgam and silicate entirely stop. This would explain in part why re-occurrence of caries around cavity margins is not as great as "seepage evidence" would make us anticipate. Similarly, it offers some explanation of why hypersensitivity of dentin which may be evident after the insertion of a restoration will gradually cease.

Although the factors responsible for the elimination of marginal seepage are not presently understood fully, two major explanations seem possible. They are as follows: 1. Certain oral fluid components, i.e., salivary mucins are slowly deposited in the crevice area and that after a suitable time has elapsed an expandable "buffer zone" is established between the lateral walls of the restorative material and the tooth tissue. Perhaps the best way to visualize this concept is to have in mind the function of a washer between the nozzle and tubing of the ordinary garden hose. 2. Soluble constituents of the restorative material are dissolved and are gradually deposited in the form of insoluble compounds in the crevice area. This could be compared to the gradual reduction in size of the opening in certain types of metal pipe. This action will in time reduce the flow of water to a trickle or in an advanced state occlude the pipe completely.

The second concept is supported by well accepted clinical observations that discoloration is often seen around amalgam fillings. This is taken to be evidence that soluble amalgam constituents have formed sulfide and oxide precipitates in the crevice area. Similarly, it has been demonstrated that soluble constituents, presumably fluorides are leached out of the silicates and react with tooth structure to form insoluble compounds.

Very possibly the latter phenomena in addition to being of assistance in reducing marginal seepage, accounts for the low incidence of caries re-occurrence around silicate fillings. This is particularly striking when we remember that in general silicate cavity preparations are rarely extended, that the material has an excessive setting shrinkage and that its solubility far exceeds that of other permanent restorative substances. These findings suggest that either soluble fluorides should be deliberately

incorporated in other restorative materials or that they should be used in the toilet of the cavity prior to insertion of the filling.

Although the foregoing discussion has dealt with marginal changes in amalgam, silicate and self-curing resins, it is not to be inferred that gold foil or gold inlays do not present similar problems. Both of these supposed superior materials undergo unfavorable marginal alterations with thermal changes and fail to show superior marginal adaptation at the time of insertion. Also in the case of gold foil, the material is permeable to oral fluids through the filling mass.

Experimental findings such as these cited emphasize the importance of expanded research on the inter-relationship between the tooth structure, restorative materials and oral fluids. They emphasize the need for the development of restorative materials that have superior adhesive qualities. Theoretically these would adhere to the tooth when it expanded and contracted and not permit an opening or closing of the margin area. These investigations also encourage us to develop new restorative materials that have thermal expansion properties that more closely approximate or are identical with those of tooth tissue. Finally, they suggest that we should think in terms of new techniques of insertion. Particularly do they point to the need for studying the advisability of inserting restorations under conditions where the tooth temperature is at one level and the restorative material at another.

For information on marginal "percolation" on permeability the following references are pertinent.

1. Nelson, Wolcott and Paffenbarger
Journal American Dental Association, Vol. 24, pp 288-295
2. Fiasconaro and Sherman
New York State Dental Journal, Vol. 18, pp 189-198
3. Thomas, A.
Paper presented—Int. Asso. Dental Research, March 1953

PRESIDENT CURRENT: Dr. Volker, we want to thank you heartily for this very, very constructive and informative address and lecture.

We hope you will stay with us and have a good time.

(Recess.)

PRESIDENT CURRENT: The meeting will please come to order.

Gentlemen, a man who needs a great deal of introduction does not need to be on a program of this kind. The fact that he is known for what he has done makes it important to us for him to come here and give us a part of that information. I should like to take a great deal of time to tell you about the man who is going to speak to us next, but I will not do it. The gentleman we have at the moment is perhaps one of the least known men in comparison to the service he does in health work, of any person

in North Carolina. I should hate to think what our general health situation would be in North Carolina without this man's efforts and work. If you knew just a little portion of the great, long list of committees and commissions and so forth that he served on, you would certainly be grateful to him for coming here today and giving us his time. I do not know what he is going to talk about, but whatever it is, it is going to be good.

It is my privilege to work with this gentleman, and it has been for three years. I have found him to be one of the most conscientious, influential, and know-how men in his job that it has ever been my privilege to know. I am happy and pleased to present to you now Dr. J. W. R. Norton, Secretary of the North Carolina State Board of Health and Chief State Health Officer.

Dr. Norton!

NORTH CAROLINA'S ADVANCING DENTAL HEALTH PROGRAM

DR. J. W. R. NORTON: President Current and Members of the North Carolina Dental Society: I appreciate sincerely and very deeply the privilege of appearing on the program with the distinguished speakers you have had up to now.

I have had the privilege of listening in today—a lot of it I did not understand, and I think perhaps some of it was over a few of your heads—but it has always been good, particularly this last talk we have had. It seemed so logical and seemed to fit in with what we have been hearing about, a lot of the things that have not been understood.

I appreciate the chance to be here. I heard Dr. Current and Dr. Brandhorst, Dr. Peterson and Dr. John this morning. I have heard Dr. Volker already, and I am looking forward to hearing Dr. Fauber a little later. He and I were down at Fort Bragg and fought the battle of Bragg together. It is good to see him him again.

It is good to see Dr. Paul Jones. He was on the Board of Health when I came back to North Carolina. He did a magnificent job on the Board. I can assure those of you who have not gotten back around to the Legislature very much, that he has done a wonderful job in two sessions of the General Assembly. He was a mighty force in getting the appropriation for the Dental School at Chapel Hill, and he was a great constructive force in all health legislation that we have had. He is a highly respected member of the General Assembly. I hope he is going to be back in there again.

I should like to say this in passing. We need some physicians and some dentists regularly in the General Assembly. It does not make sense just to send lawyers up there. I shall give you just one reason why. When bills have to be drawn up in the General Assembly, many people get the idea you have to have a lawyer so you can draw up a bill. Well, practically all the bills are drawn up in the Attorney General's office. It makes no difference who introduces them. I think Paul will confirm that. Therefore,

we need some physicians and dentists and some farmers and some others in there, good businessmen. I hope we shall have more of them.

It is also good to be here with a man I started off with as a freshman, Dr. Cooper. He probably does not like to admit that an old, gray-haired man like myself started off with him. He looks much younger.

I assure you it is a real privilege to be here. I hope I take but a few minutes, and I will turn this over to Dr. Fauber in time. I want to talk over some of the things we in public health and you in private practice need to discuss and understand.

In addressing the North Carolina Dental Society, I have that good feeling of understanding and reassurance that comes only to one when speaking with a group of friends, co-workers and well-wishers. I realize that individually, and as a body, you are and have been dependable supporters of public health in North Carolina. In fact, the dental profession has been in the vanguard and has provided able leadership in the over-all public health program in the state.

I must never forget, and I am sure you will not, that ours was the first state to put dentistry in a public health program. It was in June, 1918, that Dr. George M. Cooper appeared before the North Carolina Dental Society at Wrightsville Beach and proposed a plan whereby the North Carolina State Board of Health would inaugurate such an activity in the public schools of the state. It was my beloved friend and a member of your organization, Dr. J. Martin Fleming, who made the motion that the North Carolina Dental Society approve such an action. This activity was then immediately instituted under the direction of Dr. Cooper in the Division of Medical Inspection of School Children. Dr. Cooper also gave much credit to the late Dr. R. M. Squires of Wake Forest and Dr. J. Conrad Watkins of Winston-Salem for counsel and support in this movement.

I could recount in chronological order the activities and developments from that day until the present time. However, I shall just remind you that, as an outgrowth of that beginning, North Carolina was the second state to have a dental member on its State Board of Health, the first to have a law requiring that each county board of health include a dentist among its members, and among the first, if not the first, to have a Division of Oral Hygiene, directed by a dentist. I am proud of the fact that in our state this is one of the major Divisions of the State Board of Health. As you know there has been in some states a tendency to subordinate the administrative status of the dental unit in the state health department. I concur whole-heartedly in the position of the American Dental Association as stated in the following resolution adopted by the House of Delegates: "that dentistry be made a basic health service in all official state and community health programs" and "that a qualified full-time public health dentist who will have complete parity with medical or other personnel who are directly responsible to the State Health Director, be employed to direct and administer state dental health programs." Indeed, in our state where the

dental division has such a proud history and is such a vital part of the public health program no other status would be appropriate.

In thinking of the situation in North Carolina, we are, of course, cognizant of the great need in public health of the services the dental profession can render. We know of the widespread destructiveness of dental decay. We are aware of the dangers of oral foci of infection. We have an understanding of the relationship of an unhealthy mouth to systematic disease. We are firm in our belief that among our school children many absences, many behavior problems, and many academic and social misfits may be attributed to aching and diseased teeth. Of course, while enumerating these problems I am expecting not only a nod of agreement from you but that you will make additions to these instances from your professional observations. With your knowledge and years of experience my remarks are only kindling wood, so to speak, to start a growing flame and to suggest broader fields of opportunity.

The needs constitute an opportunity and a challenge in both fields of dentistry, private practice and public health. While each of these specialties has its own province and prerogatives they are mutually dependent. Each contributes to the success of the other and both are necessary to a balanced and advancing dental health program.

Reduced to a simple statement, our problem is the control of dental decay. This is a universal problem, not singular to North Carolina. In fact, we are in a better position than most states due, we believe, to the fact that our Oral Hygiene Division has been working on it all these years. The fact remains, however, that there is, in our state, a great gap between dental health needs and the available services. Public and private dental care resources must be marshalled and made more effective. The needs must be reduced and the services must be increased. I say "must" advisedly for we have, presently available, the means and methods for doing both.

You have provided, at least a major portion of the answer to the need for increased dental service. To the North Carolina Dental Society is due credit for the founding of the Dental School at Chapel Hill. Dr. Branch tells me that your Society appointed a Dental College Committee in 1921 and that you have worked toward its establishment through all these years. I want to congratulate you on your vision and on the fulfillment of your plans. Beginning with the first graduating class a year hence we can expect an appreciable gain in the number of dentists and, therefore, in the availability of dental services. The Little Jack Loan Fund Bill, recently passed, will be an aid to worthy junior and senior dental students who require aid in completing their course.

This leaves us with the task of reducing the need. We are advancing on this problem with three effective measures:

1. Fluoridation of municipal water supplies

2. Preventive dentistry for children
3. Dental health education

Again, you have taken the lead, this time in the promotion of fluoridation, and commendation is due you for it. Fluoridation is definitely one of the most useful public health discoveries. Supporting it are as much painstaking and meticulous research and experimentation as any measure I know of. As you very well know, however, objections have been raised. But some of us remember that there were objections to the chlorination of water, to the pasteurization of milk, and to smallpox, typhoid and diphtheria immunizations. Fluoridation of municipal waters is not mass medication, nor is it socialized medicine. It is simply restoring to water a naturally occurring and nutritionally necessary element which, through soil erosion and other abuses, has become unevenly distributed. We find that the desirable amount, about one part per million, can be restored and that the restoration can be dependably controlled. We have no excitement, whatever, over the similar restoration of vitamins and minerals to flour. No one is now alarmed at iodized salt.

To my mind it is a matter of a short time until the fluoridation program will be universally adopted for all water supplies wherever its addition is feasible. In the minds of some, your State Board of Health was a little slow and cautious in this matter. If so, it was because of our consciousness of responsibility to the people of North Carolina. We had to be reassured of complete safety from all aspects. When those scientific groups best qualified to advise with us—the American Dental Association, the American Medical Association, the National Research Council, the United States Public Health Service, and others,—endorsed the measure, your State Board of Health went on record as approving it. For obvious reasons we wanted the dental profession to take the lead. Now, the Board of Health not only approves but strongly recommends fluoridation.

Today, the children in fourteen cities and towns in North Carolina are drinking fluoridated water. Four other towns are on the verge of making the installations. Inquiries and requests for approval are being received in encouraging numbers. Dr. Branch, Director of the Division of Oral Hygiene, has cooperated to the fullest with your organization and with state and local health staffs in promoting fluoridation. He has presented its benefits before local boards of health, civic clubs, city councils, parent-teacher associations, and other groups in many communities throughout the state. The Division has provided information and literature on the subject in response to the many inquiries received. Only a beginning has been made. Neither the Dental Society nor the State Board of Health should relax efforts to bring the full benefits of this vital public health measure to all communities as rapidly as possible by providing the necessary information and stimulation.

As you know, the full benefits of fluoridation are realized by children who drink the water during the period of tooth formation, or from birth to 12 years of age. In this group a 60 per cent reduction in dental caries

may be expected. A fact sometimes overlooked is that the effects are lasting and that this group, as adults, will still enjoy the beneficial results.

We are cognizant of the fact that North Carolina, more than any other state, is rural and that thousands of people outside towns with fluoridated supplies do not have the opportunity of drinking fluoridated water. We recommend, therefore, the topical application of sodium fluoride to the teeth of these children. The Division of Oral Hygiene practices it, and we earnestly hope that you in private practice are using it. The Division of Oral Hygiene is glad to supply you with the powder for making the solution.

In the matter of dental service the greatest possibility of closing the gap between the need and the availability lies in concentrating on preventive dentistry for children. This applies to private practice as well as to public health. With the present military demands for dental service the ratio of dentists to civilian population is again becoming unfavorable. We have not been able to recruit the dental manpower in public health to provide remedial services for underprivileged children and dental health education for all children and, thus, prevent the necessity of extensive rehabilitation and restoration when the boys reach military age. A sufficient staff of public health dentists engaged in dental health education and preventive dentistry might obviate the need for some of the dentists in the armed forces. We urge you, the dentists in private practice, to give the needs of children priority. The value of dental care and education during the early years cannot be too greatly stressed. We are glad that our new dental school is emphasizing children's dentistry and is giving such good training in that field.

A vitally important approach to the problem of reducing the need is dental health education, and on this front our Division of Oral Hygiene has pioneered and is advancing confidently and effectively. To relate the many activities in this area would be telling you things that I hope you already know. I do want to quote some excerpts from my recent report to the Conjoint Session of the North Carolina Medical Society and the State Board of Health.

"The philosophy underlying the program of the Division of Oral Hygiene is well expressed in the following statement from the report of the President's Commission on the Health Needs of a Nation:

'The individual effort of an informed person will do more for his health and that of his family than all of the things which can be done for them.'

This implies the need for furnishing the individual with, to quote again from the report, 'information and motivation.' That sums up the purpose of the dental health program. It is agreed that this goal can best be accomplished by concentrating our efforts in the elementary schools.

"The question naturally arises as to what is the information we are so anxious to disseminate in such a way that each individual will appropriate it to his own good and, thereby, be motivated to adopt desirable dental health practices. Briefly, it is that a clean, healthy mouth is essential to good health and is a highly desirable esthetic and economic asset; and, conversely, that there is a very definite relationship between poor dental health and systematic disease. Furthermore, the individual must have the information that, to the best of our present knowledge, good dental health may be promoted by the following measures and he must be motivated to put them into practice:

1. Regular visits to the dentist for the early detection and correction of dental defects.
2. Eating a well balanced, protective diet with restriction of the consumption of sugars.
3. Brushing the teeth immediately after eating.

"To help in attaining this goal of a population of informed and motivated individuals, the Division of Oral Hygiene promotes a dental health education program in the elementary schools of the state." From the statistical report of educational and corrective services by our staff of school dentists certain significant items have been selected. These figures are for the year, 1952.

"We call especial attention to the classroom instruction by the dentists and attendance on these lectures by 75,229 children, an average of more than 400 each school day. Not only have these children received valuable information from the person best qualified to give it to them, but they have become acquainted with the dentist and have learned to consider the dentist as their friend. The corrective service for 28,571 children is termed demonstrative teaching. It must be remembered that these are children who, otherwise, would not have dental attention. Of especial significance is the number of six year molars filled. These 8,815 six year molars may be regarded as that many permanent teeth saved. The 3,828 six year molars extracted tell another story.

"An important group represented in the report is that of the *referred* children, 42,000 in number. These are the children whose parents are financially able to take care of their needs. Even the privileged need 'information and motivation.' These are the children who can and should be led to accept personal responsibility for their own dental health. These are the children who will be your patients. Please give them priority. They are your responsibility.

"A major service of the Division of Oral Hygiene is the preparation and distribution of dental health education material for use in the schools. This is available to the teachers, upon request. Approximately one million pieces of literature were distributed during the year. It is noteworthy that this material is dispensed only in response to requests.

"The eighteenth consecutive year of Little Jack's puppet show has been most successful. The show was presented to 167,591 children during the year. We believe that this visual education project is effective in supplying good dental health information and motivation."

Before closing, I want to mention some of the contributions dentistry is making in other areas of public health concern. In the field of nutrition dentists were among the first to apply the findings of the bio-chemists and to advise their patients in matters of diet. Fluoridation, as pointed out above, is really a nutritional measure. Your stand for the reduction in the consumption of carbohydrates or refined sugars is in harmony with, and re-enforces, the efforts of our Nutrition Section.

In our work with crippled children we are just now recognizing and classifying, to any extent, cleft palates and hare lips as crippling conditions. In the correction of these the services of oral surgeons and orthodontists are indispensable.

One of our newest sections is that devoted to the very urgent and enormous problem of diseases of the heart and blood vessels. The relationship of dental infections to abnormal cardiovascular conditions has long been recognized. We need your continued interest, research, and services in attacking this increasingly overwhelming public health enemy.

Mental health is another of our newer areas of endeavor in which dentistry is involved. I am not referring to the mental and emotional strain induced by the dental chair. The relationship of irregular, unsightly, or gradual loss of, teeth to an inferiority complex is familiar to you. This relationship, however, is sometimes overlooked and often underestimated. Here again, you have obvious opportunities for service.

These correlations could continue through other branches of public health, but there is one in particular that must be mentioned. That is the very great service you can render in the work of cancer detection. North Carolina is becoming cancer conscious. We are operating cancer detection-diagnostic clinics directed toward early finding of cancer. You have the opportunity and the obligation to participate in this program of finding cancer early as you see lesions of the mucous membranes of the oral cavity and guide patients into the proper channels for prompt treatment. With that in mind our Division of Oral Hygiene has already supplied you with literature on the subject and is endeavoring to obtain funds whereby it can be of further assistance as you discover, diagnose, and help to arrange prompt care for patients with oral cancer.

When it comes to dental service and what the dental profession can do in public health, I am like the old maid fellow kissed, "I just like to talk about it." I have been raised on it myself. In my first experience in public health, as a City Health Officer, we had a dental program directed by the Division of Oral Hygiene. I know what it is. I know what it can do and is doing for the health of my own and other children.

Through them it is making the adults of our state increasingly mouth health conscious and thus advancing the cause of dental health.

My relations with the profession have always been most cordial. Some of my very closest friends are in the dental profession. It is worth repeating that some of the most loyal supporters of public health are found in your ranks. For continued health advancement in North Carolina, may private practice and public health cooperate loyally with, and for, all our citizens.

PRESIDENT CURRENT: Dr. Norton, I should just like to ask you if you remember what you said to me when I invited you to appear on this program. If you do not, I will remind you that you said, "Well, Dr. Current, what shall I talk about?"

You are looking into the faces of a group of fine people who would say that nobody needs to tell Dr. Norton what to say when he talks to a group of dentists. You have done a great job, Dr. Norton, and we all thank you.

The Chair is pleased to announce that we have a full registration today of 836, which is just about 100 ahead of the registration of last year. Our Secretary predicts a final registration of 1200 people. We appreciate that and are grateful to you for your coming.

Dr. Clyde Minges is recognized.

DR. MINGES: Mr. President, Members of the North Carolina Dental Society, and Guests: I want to say something which is not what I was called up here to say. I do want to say that few states can boast of the fact that they have a health officer of the caliber of Dr. Norton.

Dr. Norton, I have not had this opportunity before, but I assure you that it is a real pleasure for me to thank you for the services you are rendering the people of North Carolina and for your sympathetic and understanding cooperation with the North Carolina Dental Society throughout the year.

DR. NORTON: Thank you very much.

DR. MINGES: Gentlemen, I have the pleasure of presenting to you a speaker who was graduated from the University of Pennsylvania, I believe, about 1928 or 1929 and has literally given his professional life to the service of his country and to his fellow men. Immediately upon graduation he went into the Service and served for some six or seven years. After that time he stopped to enter Johns Hopkins University where he received his Master's Degree in Public Health. He then went to the Canal Zone for several years.

About seven, or eight years ago he connected himself with the Veterans Administration. Since that time he has risen to the point that he now is Assistant Chief Medical Director in charge of the Dental Department of the Veterans Administration. I am very happy to present to you at this

time Dr. John Fauber, Chief of the Dental Services, Veterans Administration.

THE DENTAL PROGRAM OF THE VETERANS ADMINISTRATION

DR. FAUBER: Mr. Chairman, members of the North Carolina State Dental Society, and guests. I welcome this opportunity to tell you something about the development of the Dental Program of the Veterans Administration to meet the needs of an increasing veterans population. We in the Veterans Administration are constantly reviewing our operation, with a view towards increased efficiency. Therefore, I think it important to you, both as dentists participating in the program and as taxpayers paying for the program, to have some knowledge of its size and scope.

As you know, the Veterans Administration as constituted today, is the result of the consolidation of five different Governmental Agencies, and the functions of these Agencies, insofar as veterans benefits are concerned. These Agencies were: the War Risk Insurance Bureau, the Federal Board for Vocational Education, the Bureau of Pensions, the National Homes for Disabled Volunteer Soldiers, and the Part of the United States Public Health Service which had been providing medical care for veterans. The consolidation of the duties of these various Agencies under one head, together with the passage of additional veterans legislation, makes the present functions of the Veterans Administration very diversified and basically the Administrator of all the benefits provided by law for ex-members of the military establishment.

Generally, the policies of the Veterans Administration are prescribed by law and clarified in its own Regulations and Procedures. Policies pertaining to the Dental Program are formulated by the Dental Service, based upon interpretation of the law. Broadly stated, the objectives of the Dental Service are the furnishing of dental care to eligible beneficiaries of the Administration as promptly, efficiently, and economically as possible. To accomplish this purpose there are being maintained and operated 161 Hospitals of all types, 17 Domiciliaries, and 70 Regional Offices with clinical facilities, strategically located with the respect to distribution of veteran population. At the present time these Hospitals have a total of approximately 109,000 operating beds with an additional 17,000 beds devoted to the care of Domiciliary members. Each of these Hospitals, Domiciliaries and Regional Offices has a completely equipped Dental Clinic. These are staffed by over 900 full-time dentists, and 1,000 auxiliary workers; supported by less than 10 Consultants and Attendings, and 60,000 Participating Dentists for the Out-Patient Program.

In discussing the development of this Program, it is interesting to note that in 1942 the Veterans Administration operated 92 Hospitals and Domiciliaries, and 2 Out-Patient Clinics. These facilities provided 62,000 Hospital beds and 18,000 Domiciliary beds. They were equipped with Dental Clinics; staffed with 180 full-time dentists and several hundred

auxiliary workers, supported by less than 10 Consultants and Attendings; and less than 1,000 designated dentists for Out-Patient service.

It is important for you to know something about the veteran population of our country, and their average age. Based on figures released by the Veterans Administration at the beginning of this year, the average age of the approximately 20,000,000 living veterans is 38 years, with the following breakdown by War, and their average age:

Since Korea	1,483,000 veterans, average age 26
World War II	15,424,000 veterans, average age 34
World War I	3,345,000 veterans, average age 59
Spanish-American War	95,000 veterans, average age 76
Indian War	295 veterans, average age 87

Approximately 430,000 of these veterans reside in North Carolina. In addition to these veterans of wartime service, there are 61,000 veterans of peacetime service who are receiving compensation from the Veterans Administration for service-connected disabilities. Their average age is 41. The youngest veterans—those under 20 years of age—have served only since the Korean hostilities started on June 27, 1950. They number approximately 47,000. The largest number of veterans is in the age group—between 30 and 34 years. They number approximately 4,800,000. The next largest number is in the age group—between 25 and 29 years. They number approximately 4,600,000. Actually, only a small percentage of these veterans apply for treatment, but, this breakdown by age, should give you some idea of the nature of dental treatment we may expect to provide for those who do apply and are adjudicated as eligible.

To fully appreciate the scope and complexity of this program, it is necessary for you to have some understanding of the different classes of veteran beneficiaries entitled to dental care and how that entitlement is determined. These classes, or groups, are:

1. Those having service-connected compensable dental disabilities, such as gunshot or traumatic injuries of face and jaws, or who have lost vital oral structures due to disease entities. These veterans are entitled to compensation according to the extent of disability and to any dental treatment required for restoration of function.
2. Those having service-connected non-compensable dental disabilities, such as carious or missing teeth, determined to be incident to service or aggravated by service.
3. Those having a dental condition not service-connected, but medically determined to be aggravating a disability from an associated systematic disorder that is either service-connected or non-service-connected. If the basic medical disability is service-connected, then the dental treatment is considered "Adjunct" to the condition; if not service-connected, then the

dental treatment is considered "Auxiliary." Auxiliary treatment may be furnished only while patient is being treated in a Hospital. Adjunct treatment may be provided on an Out-Patient basis as well.

4. Those receiving domiciliary care, who require dental treatment to keep their mouths in a hygienic and comfortable condition with sufficient masticatory surface to maintain health.
5. Those disabled veterans pursuing a course of vocational training, under Public Law 16, who require dental treatment to prevent interruption of training.
6. Spanish-American War veterans—This group may be authorized any dental treatment that is indicated as reasonably necessary to retain masticatory function.
7. Korean veterans—This group, in addition to the benefits accorded them by the first five classes, are also given prima facie eligibility and treatment for all those dental defects shown to exist within one year after separation from the service, except replacement of missing teeth, provided they apply for treatment within one year after discharge. The missing teeth cannot be replaced until they are adjudicated as service-connected.

It is interesting to note that while following World War I, dental treatment was furnished by authority of a regulatory provision, as an essential part of medical care and treatment, it was not until June 7, 1924 that dental treatment as a separate benefit for veterans was specifically authorized by law, included in an Act known as "The World War Veterans Act of 1924," and while this Act itself has been amended by later Acts passed by the Congress affecting many of its provisions, this legislation still remains the basis for the supplying of medical care including dental treatment to veterans.

No doubt the term "service-connected" confuses you to some extent. This determination is made by the Claims Service of the Veterans Administration, not by the Department of Medicine and Surgery. When a veteran files an application for treatment or for compensation for a dental disability, the Claims Service obtains his pre-induction examination record, his dental treatment record during service, his discharge examination record, and any notarized records of treatment secured from a private dentist within one year of discharge, provided the veteran had honorable active wartime service of 6 months or more. From these basic records the Claims Service makes a determination of which teeth are service-connected, or whether there is present a generalized dental disease which may legally be treated. When this "service-connection" is established, the veteran is examined to determine his treatment needs, and that phase of the treatment to which he is legally entitled is authorized.

With this broad historical background and résumé of the veteran

population, together with the basis upon which entitlement to dental care and treatment is determined, I would like to discuss the various phases of our program.

I believe the out-patient phase of the program is the one which has had its greatest influence upon you. In the last five fiscal years, 3,587,648 applications have been received for out-patient treatment, over 70,000 of these were from veterans residing in North Carolina.

Sixty-nine percent of these were examined to determine the nature of the treatment required; the other thirty-one percent were ineligible, cancelled, or were withdrawn by the veteran prior to examination. Of those examined, fifty percent were done by Participating Dentists and the others by our own staffs. Of those examined, seventy-nine percent received treatment; eighty-five percent of which was accomplished by the Participating Dentists. For these examinations and treatments performed by the Participating Dentists in this five-year period, we have paid the dentists of our country in excess of \$180,000,000 and approximately \$4,000,000 of that amount was paid to the dentists of North Carolina for this service during this period. This is quite an increase over the \$52,648 we paid to the dentists of our country for FY 1942.

While I hesitate to list this as one of the major benefits of the program, I am sure it has meant something to you. An interesting observation of this five-year period is that the average treatment cost per case, from July 1947 to July 1952, has increased by over 35% in North Carolina. True, your State has had two upward revisions of the basic fee schedule of 1946, and these revisions have contributed to that increase, however, I believe the increase in treatment cost per case is due principally to increased dental disease.

In a recent sample study of our out-patient cases, it was found that approximately sixty-five percent of the treatment required by veterans applying for out-patient treatment is non-service-connected. In other words, the amount of treatment that the Government is committed by law to provide for this group of veterans is less than one-third of that required. This presents us with an extremely difficult professional problem. Claims Service may inform us that a first molar is service-connected. Upon examination of the case, we find that it is missing, and also that the second bicuspid and second molar are missing, which are listed as non-service-connected. Obviously, we cannot replace the service-connected first molar without replacing the non-service-connected second bicuspid and second molar. This leads us to the treatment of some non-service-connected teeth, but only to the extent that sound professional practice demands. The remainder of the treatment must be provided by the veteran at his own expense.

Before leaving the Out-Patient phase of our program, I would like to discuss briefly the State Fee Schedule. In August 1945 we requested the assistance of the American Dental Association, in the establishing of a new fee schedule. Following a number of conferences, agreement was

reached on an average schedule, to be used as a National baseline, for the establishment of fee schedules at State level. The negotiations for this schedule to be conducted by the Chief of Dental Division of Branch Offices and the Veterans Advisory Committee of each State Dental Society. This procedure remained in effect until 1949 when Branch Offices were abolished, and the Chief of Dental Service of the State Regional Office was designated the Veterans Administration representative in these negotiations. In 1950, this procedure was revised as a result of action taken by the House of Delegates at the Atlantic City Meeting of the American Dental Association, when that body requested "each constituent society to undertake a survey of the fees paid for dental treatment services within the areas of its jurisdiction for the purpose of aiding in the determination of a State Fee Schedule which will be equitable for those paying the cost of Federal treatment and for all of the dentists practicing within the State." Since that action by the House of Delegates, the Veterans Administration has renegotiated some State Fee Schedules, but only after the State Survey was conducted, and the results when submitted to the Veterans Administration representative justified the adjustment. For those of you who do participate in this program as Participating Dentists, it is important that you understand that the Fee Schedule of your State is the maximum fee that may be paid for these routine services listed in that Schedule. Unusual or special cases may be authorized at Special Fees. But, in no instance, should you charge a fee in excess of those received in your usual practice. In fact, the "Authorization and Invoice" which you receive and sign when providing out-patient treatment for a veteran, contains a statement that "Fees authorized herein are the maximum allowable. Charges billed may not exceed those made the general public for the same or similar services in your locality." So that in effect, you are certifying that you are not charging higher fees than you normally receive in your practice.

In the Hospital and Domiciliary phase of our program, we provide a varied quantity of dental treatment for the patients, according to their eligibility. Approximately 204,000 patients were cared for during Fiscal Year 1952 in our NP, TB and Domiciliary beds. These patients are mostly long-term cases and in some instances are virtually residents of the installation. For example, as of January 1952, about 87 percent of all psychotic patients in Veterans Administration Hospitals were on the hospital rolls for more than one year. For these patients we serve in the capacity of family dentist, and provide care not only for dental diseases which may have a bearing on their medical condition, but also for their other dental needs. In the GM and S Hospitals, where approximately 427,000 patients were cared for during Fiscal Year 1952, dental service is provided mainly on a referral basis. The stay in these hospitals is, of course, not as long as for other types of hospitals, for example, the medium length of stay of GM and S patients is less than 18 days. For this group an effort is made to do a complete and thorough dental examination on as many patients as possible, for several reasons:

1. To determine existing dental disease and report it accurately, in a manner that is clearly understood by the Ward Physician, charged with the care of the patient; in order that these findings may be related to the over-all medical treatment plan.
2. To correct defects having a bearing upon the condition for which the patient is hospitalized.
3. To motivate the patient to maintain his dental health after leaving the Hospital.

A recent study of dental treatment, provided patients admitted to one of our busiest GM and S Hospitals, disclosed the fact that less than four percent of the dental treatment required for this type of patient was provided while in the hospitals. Surely this emphasizes the importance of encouraging the patient to follow necessary dental-health practices after he leaves the hospital.

In North Carolina we operate three hospitals and have another under construction which will be completed soon. At Fayetteville we operate a GM and S Hospital with 360 beds. At Durham we recently opened a GM and S Hospital which will operate approximately 491 beds. At Oteen we operate a Tuberculosis Hospital with two divisions, totaling 1500 beds. At Salisbury there is under construction an NP Hospital which will open in several months and eventually will operate approximately 937 beds. At these hospitals, as is the case in all our Hospitals, the Dental Service is a recognized service on an equal organizational basis with Surgery, Medicine, and the other Services, not an auxiliary service of the hospital as is often erroneously stated in News articles on Veterans Administration Hospitals. In fact, over 75% of our Hospital Dental Services are accredited by the Council on Hospital Dental Services of the American Dental Association.

In addition to the Clinics which we operate in our Hospitals, Domiciliaries and Regional Offices, we maintain 11 Central Dental Laboratories, all under the direction of a full-time prosthodontist. These Central Dental Laboratories are strategically located with respect to station distribution and normal lines of communication to facilitate the service to the field stations. These Laboratories are equipped and staffed to fabricate any type of dental prosthesis requested by the field stations.

To maintain high standards of treatment, we operate a continuous educational and training program for all of our personnel. Each year many of our personnel are provided short courses in post-graduate schools, and a few carefully selected ones receive a full academic year of post-graduate instruction. Regularly scheduled lecture programs are maintained at our installations, to which Dental Society members are frequently invited. We conduct residency programs in Oral Surgery, Prosthodontia, and Periodontia. Some of these are already approved by the Council of Dental Education, and the others are in the process of ob-

taining approval. In-Service Training in our installations is a continuing activity, supported by the use of Consultants and Attendings in treatment and clinical demonstrations. Many of our Consultants are faculty members of Dental Schools, or leaders in the profession in specialties, well equipped to give our staffs what amounts to post-graduate training. To mention a few from your State who are associated with us in this capacity: Drs. Brauer, Truluck, Fless, Hall, Chapin, Walker, Blair and others. Also, it may be of interest to know that Dr. Paul E. Jones is one of my Central Office consultants. We are in the process of developing a Dental Training Center of our own at the Veterans Administration West Side Hospital, Chicago, Illinois, where our personnel will be trained for our specific needs—both administratively and professionally. This Training Center will not parallel nor be in competition with the already well-established post-graduate schools in our dental schools. We propose to continue the use of those schools for that phase of our educational needs.

Naturally a program of this size requires supervision. To accomplish this phase, we have full-time Area Dental Supervisors in each of the six Area Medical Offices, located at Boston, Washington, Atlanta, St. Paul, St. Louis and San Francisco. Each of these men is supported in this activity by four Area Dental Consultants, carefully selected from the leaders in our profession for this specific duty, from geographic area in which they are serving. Each Area Office has the responsibility for supervision of approximately 40 stations. Your State is a part of the Atlanta Medical Area, and the Area Dental Consultants for your area are: Dr. Clyde Minges, Rocky Mount, N. C.; Dr. Ralph Griffin, Birmingham, Ala.; Dr. James Harpole, Atlanta, Ga.; and Dr. John Tavor, Jacksonville, Fla.

Three of the areas in which I believe this program has materially contributed to the progress of American Dentistry, are:

1. Development of Dental Materials and Equipment.
2. Improvement of Medico-Dental Relationship.
3. Improvement Upon the Standard of Practice.

In the Development of Dental Materials, we contribute annually to the operation of the Dental Research Laboratory of the National Bureau of Standards, with both personnel and funds. Some of their recent developments of note are the studies in:

- a. The Color Stability of Direct Filling Resins.
- b. Thermal Expansion of Silica-Gypsum Investments.
- c. Mechanism of Hygroscopic Expansion of Dental Casting Investments.
- d. Temperatures Developed in Rotating Dental Cutting Instruments.

In the field of Dental Equipment, our recent development of an overhead Dental X-ray Mount is worthy of mention. This overhead Mount was

developed for our use primarily in TB Unit Clinics of our GM and S and NP Hospitals, where available space was a factor. The construction of this Mount is such that a 360-degree rotation around the head of the patient is possible. The head can be lowered a sufficient distance to obtain proper anterior positioning at an angle of 35 degrees below the horizontal, and can be raised to allow a 6 foot 3 inch clearance tube to floor. This tube to floor clearance makes it possible to fully utilize floor space which, with the present mobile or wall mount, is unavailable. The overhead Mount operates just as satisfactorily in larger Clinics. The Mount, complete with X-ray tube head, will not weigh more than 150 pounds. Its over-all horizontal dimensions is 53 inches. It can be operated in a room as small as 6 feet 4 inches in width. Due to the method of tube head support, there is no "whip" or vibration of the head after positioning, a fault generally present in units employing pantograph arm suspension of the head. Recently, Medical and Surgical Services have shown considerable interest in the possibilities of the mount.

Improvement in Medico-Dental Relationship—This improved relationship in the Veterans Administration will have its direct influence upon the relationship of our two professions in civil life. Some of the factors which have contributed to this mutual respect in the Veterans Administration are:

1. Parity of grade between physician and dentist in our installations, and recognition of the Specialty Boards of Dentistry as in Medicine.
2. Dental representation on top level advisory groups, such as the Council of Chief Consultants and the Special Medical Advisory Council, has had its influence.
3. Dental representation on Deans Committees of Affiliated Hospitals. At the present time we have dental representation on 23 Deans' Committees. At the VA Hospital, Durham, Dr. Norman Ross is a member of the Deans' Committee.
4. And more important than the others, is the universal recognition of the importance of including oral diagnosis in the over-all treatment planning for hospitalized veterans. The scope of dental service has changed radically from that of an auxiliary service which is incidental to hospital care to that of a fully accepted member of the Medical team. The limitations on this integration are primarily those of our profession.

The third area in which we have contributed to dental progress is in the Improved Standard of Dental Practice. Our insistence upon full-mouth X-rays at initial examination in both Out-Patient and In-Patient cases has had tremendous effect upon all of dental practice. Through the clinical observation of techniques, in the examination and treatment of great numbers of patients, we can and do contribute reliable conclusions. Our worthwhile contributions to scientific literature are becoming more fre-

quent. Few national or state scientific meetings are conducted without members of our staff contributing with table clinics, exhibits or essays. Our constant use of Dental Consultants, selected from the leaders in our profession, has guaranteed the continuation of high standards. Our spot-check inspection of Out-Patient treatment, provided by Participating Dentists, certainly has served as a guide to better dentistry. Our continued support of post-graduate education, along with the development of internships and residencies, will have increasing influence upon the elevation of standards. Finally, the motivation for improved dental-health practices in the veteran, is having its influence upon his family and friends as well.

In conclusion, for you our experiences have other specific meanings:

1. They infer, if they do not describe exactly, the necessity for much more emphasis directed towards the education of our citizens of the need for good oral hygiene.
2. They describe the existence of a widespread un-met demand for dental treatment.
3. They suggest the need for more basic research in certain areas of dentistry and dental practice.
4. They demand the constant self-elevation of our standards of dental practice.

I am sure you all realize that this program would not be possible without the cooperation and full support of organized dentistry, through your various societies, as well as the dental schools of our country. We greatly appreciate and hope this support will continue in the interest of further contributions to our professional growth. For myself and the members of our staff, stationed in your state, I want to thank you for this support and the friendly manner in which you have accepted us.

PRESIDENT CURRENT: Dr. Fauber, we thank you kindly for this excellent report. I think you can see by the attention you received that this is a matter in which all dentists are vitally interested. I hope you will continue with us and have a very, very good time.

DR. FAUBER: Thank you.

PRESIDENT CURRENT: This concludes our program for the hour. We shall have an election of officers at eight o'clock.

There will be a House of Delegates meeting immediately thereafter.

Until the election of officers at eight o'clock, we are adjourned.

(The meeting adjourned at 5:00 o'clock p.m.)

GENERAL SESSION

Monday Evening, May 18, 1953

The meeting reconvened at 8:30 o'clock p.m., President Current presiding.

PRESIDENT CURRENT: Will the meeting please come to order.

As you know, Election of Officers is the order of business at this time.

The Secretary has one or two announcements before we proceed.

SECRETARY WALKER: We have a number of excellent table clinics to be held in this auditorium tomorrow from nine a.m. to twelve noon. A variety of interesting subjects have been selected and much effort has gone into their preparation.

I want to apologize to Dr. F. B. Pratt of Salisbury for unintentionally omitting his name from the Program. His subject is "Clinical Experience with Trichloroethylene and General Anesthesia." Your attendance at these clinics will be worth your while, I am sure.

In the morning, the Past Presidents' Breakfast will be held at eight o'clock in the Crystal Room.

Dr. R. Fred Hunt, Immediate Past President, will preside.

The District Officers' Breakfast is scheduled to be held in one end of the dining room.

All new members who have joined the Society during the past year are especially urged to be present at the breakfast in the Stag Room at eight o'clock. The purpose of this Conference is to have an opportunity to welcome the new men into the fellowship of the Society. Dr. A. C. Current will preside.

The Psi Omega Fraternity will hold a meeting at eleven-thirty tomorrow morning in the Pine Room.

PRESIDENT CURRENT: Thank you, Dr. Walker.

The first order of business is nomination for the President-Elect of the North Carolina Dental Society.

DR. S. E. MOSER: Mr. President, Fellow Members of the North Carolina Dental Society, Distinguished Guests, Ladies: While all this confusion and frustration is going on, before I embark on my regular speech, I want to tell you a story.

In my section of the country (I might say, incidentally, I am a Methodist of the worst sort), we have a character, a minister, who is outstanding in my section. We call him Uncle Rob Hall. Consider him to be an eccentric. Those of you who are Methodists know something about what is called a "count" meeting. That is where people go, and have a general

order, which is a church, well-ventilated, no windows around it, and people count. For one week they have religious services.

Uncle Rob Hall was preaching for the first time in this order. In the midst of a great sermon he suddenly paused and said, "Ladies and Gentlemen, I have always been, being a Methodist minister, an itinerant preacher, a moving preacher, but this is the first time that I have ever preached to a moving congregation."

I believe it was only three years ago that I stood on this very spot and nominated Bernard Walker for Secretary-Treasurer of the North Carolina Dental Society. To me it seems only yesterday. To him it probably seems a decade. Then, too, I cannot help but recall that it was one of those unfortunate elections where two good men were in the running. A very sterling character, Marvin Evans, lost by a very small margin of votes to Bernard.

There are certain men whose native ability carries them beyond the rank and file of their fellows, and whose names are stamped out as beacon lights in the general progress. In this galaxy of great men is the name of Marvin Evans who, today, is rendering an invaluable service to the North Carolina Dental Society as the Publisher-Editor of our Society. I hope it will not be in the too far distant future when I shall again stand right here on this very same spot and nominate him for the position of President-Elect of the North Carolina Dental Society.

Now back to my nominating speech.

It is not necessary for me to pay an eulogy or loving tribute to Bernard Walker. For three years through countless errors of toil, of investigations, of myriads of gripes, to put it in the vernacular, from our members, and of unselfish devotion to duty, he has laboriously accumulated the knowledge necessary for the making of a great President. It has been my observation that our Secretary-Treasurers have made us our greatest Presidents. Of course we would have to make exceptions—to name one, our esteemed colleague, Eddy Current.

Gentlemen, it is my considered judgment that we, as members of the North Carolina Dental Society, are bound by honorable obligation to Bernard Walker to elevate to him to that exalted position of President-Elect of the North Carolina Dental Society. I appeal to you to follow this lead and honor that sacred obligation.

I nominate Bernard Walker for President-Elect of the North Carolina Dental Society. (Applause.)

PRESIDENT CURRENT: Dr. Bernard Walker has been nominated for President-Elect of the North Carolina Dental Society. Are there any other nominations?

(The nomination for Dr. Walker was seconded.)

DR. D. L. WELLS, JR.: I move that the nominations be closed and that the rules be suspended so that he may be elected by acclamation.

(The motion was seconded.)

PRESIDENT CURRENT: Thank you. The Secretary usually casts the vote for that. We do not have a Secretary to cast that vote, and since you are elevating an exceptionally fine Secretary to a higher position in this Society and doing it by acclamation, I should like this congregation to rise in unison and in acclamation of Dr. Bernard Walker for President-Elect.

(The audience rose and applauded.)

PRESIDENT CURRENT: President-Elect Bernard Walker, I am going to concur in what Dr. Moser said about your present President being among those who work with the Secretaries. I am not being egotistical when I say that, but I am saying the fact that I have had the Secretary I have had has made me a better President. It gives me a great deal of pleasure to welcome you as President-Elect of this Society.

PRESIDENT-ELECT BERNARD N. WALKER: Thank you, Dr. Current.

Members of the North Carolina Dental Society, Friends, Guests: It is really a thrill to be here. You know, it has been a pleasure to serve as Secretary-Treasurer through the many district meetings that I have attended. It has been no task because I have enjoyed each and every one of them. I just wish that every member of the North Carolina Dental Society, from each district, could visit each of the other districts.

I have many people to thank for where I am tonight. The man who took me by the hand when I was a new Secretary and who taught me the ropes, gave me all the instructions, and a fatherly pat, Dr. R. Fred Hunt. The Presidents that I have served under. I have enjoyed every minute. There have been times of trial, and they have been gracious, they have been understanding.

I have tried to do my best because, after all, the North Carolina Dental Society, organized dentistry, is my profession. All that I have is due to the dental profession. The fact that when I finished dentistry, and the success that I have made thereafter, has only been built on the effort of the men who have preceded me. I just hope I can continue to be worthy of the trust you have placed in me.

I should like very much, at this time, to thank a man who three years ago had the courage and the confidence in me to stand up here and nominate me as Secretary-Treasurer of the North Carolina Dental Society. Let me assure you that in time to come, as an elective officer of the North Carolina Dental Society, I shall be here to serve each and every member of this Society, because after all, each of you have elected me.

Thank you very much! (Applause.)

PRESIDENT CURRENT: We know you will do that, Bernard.

The next order of business is the nomination for Vice-President of this Society. The Chair entertains a nomination for Vice-President.

Neal Sheffield is a good man, but he has to have a running mate.

DR. R. FRED HUNT: Mr. President, Dr. W. H. Breeland from Belmont is nominated as Vice-President of the North Carolina Dental Society.

DR. O. B. KIRBY: I second the nomination.

I should also like to put in that nominations be closed and we direct Dr. Breeland be elected by acclamation.

PRESIDENT CURRENT: Thank you, Dr. Kirby. The nominations have been moved to be closed. Do we have a second?

(The motion was seconded put to a vote, and carried.)

PRESIDENT CURRENT: I will direct—and I suppose he will not be offended if I still call him our Secretary—Dr. Walker to cast the unanimous vote of this Society for Dr. Wade Breeland.

(The Secretary cast a unanimous vote for the Society for Dr. Wade Breeland of Belmont, North Carolina, for the Vice-Presidency of the North Carolina Dental Society.)

PRESIDENT CURRENT: Dr. Breeland, will you come forward, please. We are certainly glad to have you. We know you will do a good job, and I am glad to welcome you as Vice-President of the North Carolina Dental Society.

DR. W. H. BREELAND: Mr. President, Members of the North Carolina Dental Society: I do not know what Fred Hunt had against me when he did this, unless he knows I am a fairly good athlete. He thinks Neal is going to have to have somebody to help him do a little straightening out.

I assure you that whatever the job calls for I shall give it my full support. I want the incoming President to call on me for anything he feels I am capable of doing.

I appreciate the honor of this office, and I assure you it will be my full endeavor to do everything possible in meeting the requirements of this office.

Thank you! (Applause.)

PRESIDENT CURRENT:

The next order of business is the nomination for Secretary-Treasurer of the North Carolina Dental Society.

DR. FRED HALE: President Current, Members of the North Carolina Dental Society, and Guests: Several years ago there came from the foot-

hills of Virginia by way of Tidewater, Virginia, to North Carolina, a tall handsome blond, to cast his lot to live in this state and to practice dentistry.

Over the years he has rendered a creditable service both to his community and to this profession. He is a hard worker, honest, sincere, straightforward, trustworthy, cooperative, and humble in achievement. He puts his shoulder to the wheel and pushes diligently for all that is worthwhile in the community and in his profession.

It gives me pleasure to place the name of Dr. S. B. Towler in nomination for Secretary and Treasurer of the North Carolina Dental Society, with the knowledge that if he is elected he will render a creditable service to the members of our profession. (Applause.)

(Dr. Edward Smith seconded the nomination of Dr. S. B. Towler.)

PRESIDENT CURRENT: The name of Dr. S. B. Towler has been placed in nomination for Secretary-Treasurer of the Society. Are there other nominations?

DR. WALTER McFALL: Mr. President, Ladies and Gentlemen of the North Carolina Dental Society: It is with a great deal of pride and pleasure that I place in nomination the name of Dr. Ralph D. Coffey of Morganton, North Carolina, for this fine office of Secretary-Treasurer.

Ralph has been our Secretary for four years. He has been a past President. He has served and has served well all of the offices in our district, and has served well every office on the statewide level. He knows how to be Secretary. He is successful in his own practice and in his civic duties and social obligations. I am sure he will acquit with honor and credit this high office. (Applause.)

PRESIDENT CURRENT: Dr. Ralph Coffey of Morganton has been nominated for Secretary-Treasurer.

Are there any other nominations?

DR. S. H. STEELMAN: I should like to second the nomination of Dr. Coffey for Secretary-Treasurer.

PRESIDENT CURRENT: Are there other nominations.

DR. KENDRICK I move that nominations be closed.

PRESIDENT CURRENT: It is moved that nominations be closed and the ballot held on the two nominees. Is there a second?

(The motion was duly seconded by P. B. Whittington, was put to a vote, and carried.)

PRESIDENT CURRENT: There will be a secret ballot on this, and we shall proceed now in the usual manner of making that Ballot.

Dr. Sam Bobbitt is the head man. I believe he is here right now.

We should like to have the secretary of each District Society come forward. Each secretary of the District Societies, and you know who you are, please come forward—the secretaries of the First, Second, Third, Fourth, and Fifth Districts.

You all know the rules and regulations of this procedure. You are asked to follow it. We will all be guided by your district secretaries, who know you, and whether you are qualified to vote.

We will now proceed to vote.

(The balloting then took place.)

PRESIDENT CURRENT: The meeting will now please come to order.

I must say it always hurts me a little when you only have one good job to do and two good men to do it. It looks like we are just a little short of jobs. I know both these men personally. I know each one of them would do a nice job here. The voting has been closed, and Dr. Ralph Coffey is elected Secretary-Treasurer of the North Carolina Dental Society. (Prolonged applause.)

Ralph, please come forward.

DR. S. TOWLER: Members of the North Carolina Dental Society, I should like for all of us to make this vote unanimous for Ralph Coffey as Secretary-Treasurer of the North Carolina Dental Society. (Prolonged applause.)

PRESIDENT CURRENT: Dr. Towler suggested that this vote be made unanimous, and I am certain we concur in that. Ralph, I want to congratulate you.

DR. RALPH COFFEY: Mr. President, Members of the North Carolina Dental Society, and Guests: in all humility I accept your decision here this evening. I am aware of the responsibilities in the work that is involved. I pledge to you, each and every member of the North Carolina Dental Society, that I will discharge my duties in the interest of the Society.

I appreciate the confidence that you have this evening placed in me. I shall do my best to be worthy of such confidence.

Thank you! (Prolonged applause.)

PRESIDENT CURRENT: The next order of business is the election of two members to the North Carolina State Board of Dental Examiners. If I am wrong in these men whose terms are expiring, I would be glad to stand corrected.

I have it that we are to elect, now, some man to succeed Dr. Erbie Medlin as a member of the State Board of Dental Examiners. I presume that is correct according to our records.

DR. C. C. POINDEXTER: I should like to nominate a man who has been

tried for the job he has done. I nominate Dr. Erbie Medlin to succeed himself as a member of the Examining Board.

PRESIDENT CURRENT: Are there other nominations?

DR. CLYDE MINGES: I move the nominations be closed.

(The motion was duly seconded by Dr. Truluck, put to a vote and carried.)

PRESIDENT CURRENT: We shall ask our Secretary, Dr. Bernard Walker, to cast the unanimous vote for this Society for Dr. Erbie Medlin to succeed himself as a member of the Examining Board.

SECRETARY WALKER: Mr. President, it gives me a great deal of pleasure to cast the unanimous vote of the North Carolina Dental Society for Dr. Erbie Medlin to succeed himself as a Medical Examiner for North Carolina.

PRESIDENT CURRENT: Dr. Medlin, where are you? Please come forward.

Thank you, Dr. Medlin. You have been tried, and you will be tried again in the next three years.

DR. ERBIE MEDLIN: I do not have any speech. I just want to say thank you for this trust and the opportunity of serving you again. (Applause.)

PRESIDENT CURRENT: The next order of business is the nomination for a Board member to succeed Dr. Sandy Jennette.

DR. DAN WRIGHT: Mr. President, I should like to place in nomination a man who has served on the Board two terms of three years each. He has served as President of the Board for the past two years and has served, I think, with honor, distinction, and with very much ability. I should like to nominate Dr. Sandy Jennette to succeed himself.

PRESIDENT CURRENT: Dr. Dan Wright nominated Dr. Jennette to succeed himself. Are there other nominations?

MEMBER: Is it in order to make seconding speeches?

PRESIDENT CURRENT: It does not require a second, but it can be strengthened by as many as want to speak to it.

MEMBER: I should like to, at this time, second the nomination of Dr. Sandy Jennette who has served ably from the Fifth District of the North Carolina Dental Society, six years on the North Carolina State Board of Examiners.

Dr. Jennette is an experienced man. He served in World War II. Dr. Jennette practiced dentistry in Washington, North Carolina for many years. He is qualified and able to represent this body as an examiner for the new men that are coming into the Dental Society and the profession of North Carolina.

I wish to second his nomination.

PRESIDENT CURRENT: Are there other nominations?

(No response.)

PRESIDENT CURRENT: Dr. Sandy Jennette is nominated to succeed himself.

DR. ROSS: Mr. President, I move that the nominations be closed.

PRESIDENT CURRENT: Dr. Ross moves the nominations be closed.

(The motion was duly seconded, was put to a vote, and carried unanimously.)

PRESIDENT CURRENT: We shall ask our Secretary to cast the unanimous ballot of this Society for Dr. Sandy Jennette to succeed himself as a member of this Examining Board. (Applause.)

SECRETARY WALKER: It gives me a great deal of pleasure to cast the unanimous vote of the Society for Dr. Sandy Jennette to succeed himself on the North Carolina State Board of Dental Examiners. (Applause.)

PRESIDENT CURRENT: Dr. Sandy Jennette, come up to the platform.

Congratulations, Sandy!

DR. JENNETTE: Thank you very much.

I have said that I thought two terms were enough. I am going to have to ask some of you gentlemen to give me a few questions. I have run out. However, I shall do the best I can. There is a lot of fun in it, a lot of pleasure, and a lot of headaches and a lot of work. However, I shall try to do the best I possibly can.

Thank you very much! (Applause.)

PRESIDENT CURRENT: We might tell Dr. Sandy to drop over to Chapel Hill, and some of the three-year boys over there might give him some questions.

We are now to the order of business of electing delegates to the American Dental Association.

Our records show that the House of Delegates of the American Dental Association will require two members. Dr. Wilbert Jackson's term expires. We will receive a nomination for someone to succeed Dr. Jackson to the House of Delegates of the American Dental Association.

DR. WILBERT JACKSON: Mr. President: I think if you will read your records you will see that I have been elected.

PRESIDENT CURRENT: We are glad to stand corrected.

DR. JACKSON: I have three years to go before my successor succeeds me.

PRESIDENT CURRENT: Dr. Charlie Poindexter informed us he was serving an unexpired term. I presume his term has now expired and we shall have to select a member to the House of Delegates to succeed Dr. Poindexter. Is the Chair wrong?

DR. T. EDGAR SIKES: Since Dr. Poindexter was appointed to fill the unexpired term of Dr. Lineberger, I should like to place his name in nomination to succeed himself.

(The motion was duly seconded.)

(It was moved and seconded the nominations be closed and that Dr. Charles Poindexter be elected by acclamation.)

PRESIDENT CURRENT: Our Secretary will cast a unanimous ballot.

SECRETARY WALKER: It gives me a great deal of pleasure to cast the unanimous vote of the Society for Dr. C. C. Poindexter to the House of Delegates of the American Dental Association.

PRESIDENT CURRENT: Dr. Charlie, where are you? (Applause.)

It is now in order to elect five alternates to the House of Delegates of the American Dental Association.

DR. RALPH COFFEY: I should like to nominate Dr. Paul Fitzgerald.

PRESIDENT CURRENT: Dr. Paul Fitzgerald has been nominated as an alternate.

DR. RUFUS JONES: I should like to place in nomination Dr. R. Fred Hunt.

PRESIDENT CURRENT: Dr. R. Fred Hunt has been nominated as an alternate delegate.

DR. HOMER GUION: Mr. President, I should like to place in nomination Dr. Eddy Current.

PRESIDENT CURRENT: You could have done better.

We have three nominations so far.

DR. E. MEDLIN: I should like to nominate Dr. Sam Towler.

PRESIDENT CURRENT: We have four in nomination.

MEMBER: Mr. President, I should like to nominate Dr. Bernard Walker.

PRESIDENT CURRENT: Dr. Walker is automatically a delegate.

MEMBER: I should like to nominate Dr. Frank Kirk of Salisbury.



Table Clinics Presented at Pinehurst meeting.



Table Clinics Presented at Pinehurst meeting.

(A motion was duly made and seconded to close the nomination, put to a vote and carried unanimously.)

PRESIDENT CURRENT: Inasmuch as your Chairman is one of these alternate delegates, I refuse to call for this question. I will let the Secretary do that.

SECRETARY WALKER: The motion has been made and seconded that these five men be elected as alternate members to the House of Delegates of the American Dental Association. All in favor, let it be made known by "Aye."

(The motion was put to a vote and carried unanimously.)

PRESIDENT CURRENT: The Chair would like to entertain an invitation for a place to meet.

DR. ROYSTER CHAMBLEE: I move that we meet at Pinehurst.

PRESIDENT CURRENT: Gentlemen, you remember the President of Pinehurst, in the letters read, when he told us how welcome we were from year to year, expected us to come back every time. He extended us a standing invitation.

It has been moved that we meet at Pinehurst next year.

(The motion was seconded, put to a vote and carried.)

PRESIDENT CURRENT: We come back to Pinehurst. This concludes our business for this hour in the General Session.

A meeting of the House of Delegates will be in order in just a moment. It is the opinion and it is the feeling of your Chairman that he will be privileged without a vote to change the order of business for the immediately forthcoming meeting of the House of Delegates. It may be that following that meeting there will be a call meeting of the General Assembly, so you people who are stretching and having a good time and doing a few things, stand by.

This session is adjourned, and the House of Delegates will meet immediately.

The officers are requested to assemble and have their pictures taken. This is first time I heard of that, I believe, during this meeting. It is about time we get started.

We now stand adjourned.

(The meeting adjourned at 9:45 o'clock, p.m.)

GENERAL SESSION

Tuesday Afternoon, May 19, 1953

The meeting reconvened at 2:10 o'clock, p.m., President Current presiding.

PRESIDENT CURRENT: The meeting will please come to order. The Chair would like to announce the following in attendance as of about 11:30 today (it is not up-to-date.) There is a grand total of 1117 members which is about fifty more than we have ever had here at the close of a meeting. I think that deserves a hand for a big meeting at this time.

Dr. Kendrick is recognized.

DR. KENDRICK: Mr. President, members and guests: It is a real pleasure to be able to introduce to you a friend of mine whom I met in Chicago fifteen years ago while he was serving his residency at Cook County Hospital. I am sure that under his guidance the department of Oral Surgery at the University of North Carolina will prosper and grow as it properly should.

Dr. Chapin received his Doctor of Dental Surgery degree at Loyola University, Chicago, and upon graduation interned at Forsyth Dental Infirmary for Children. In 1940 Dr. Chapin returned to Loyola University where he remained on the teaching staff until he joined the faculty at the University of North Carolina.

Dr. Chapin's subject for today is "Dentistry More Than Teeth".

Dr. Chapin.

DR. MARVIN CHAPIN: President Current, Dr. Kendrick, Members of the North Carolina Dental Society, Ladies and Gentlemen: I am indeed honored and deeply grateful to be asked to speak before this Society.

The topic that I have chosen today is one that is pretty close to my heart, the topic of "Dentistry More Than Teeth." It is not too difficult in our daily practice to miss the forest, because a lot of the trees get in the way. When we get used to making our living from teeth and associated structures, many times the teeth overshadow the other structures in the individual as a whole.

I have a series of colored slides that range from congenital anomalies to malignant diseases, through traumatic injuries, through benign lesions, through blood dyscrasias and other systemic conditions that we as dentists should be able to recognize, not necessarily to treat, but to refer the patient for adequate treatment.

Without further ado, I should like to start the slides, and we can talk from there. Thank you!

(Dr. Marvin E. Chapin presented his Essay, "Dentistry More than Teeth,"

PRESIDENT CURRENT: Dr. Chapin, let me thank you personally and express the gratitude of this audience for the informative and scholarly manner in which you have presented your subject.

Marvin, I hope you will "stick around." We are going to lighten up a little in the latter part of the evening.

Gentlemen, the House of Delegates of this Society is terribly behind with its official business. Will each committee chairman who has not made a report please get his report in order. If you cannot stay for the House of Delegates meeting in the morning, please hand your report to Dr. Walker. Most of this work will of necessity be admitted by title.

Thank you kindly.

DR. MARVIN EVANS: President Eddy, Fellow Members of the North Carolina Dental Society, and Guests: It is my happy privilege to present at this time our next essayist.

He comes to us from the friendly city of Philadelphia. He is a successful practitioner of dentistry, an excellent teacher, and organizer. His accomplishments have been presented to you in the Program, and I will not take time to enumerate these. He is also the Director of the Dental Hygiene Curriculum at the University of Pennsylvania.

It was my happy privilege last year to spend time associating with Dr. Berry. I know that you would much rather hear what he has to say than what I have to say. Therefore, I will not take any more of your time.

I am happy to present my good friend, Dr. Harrison M. Berry, Jr. (Applause.)

DR. BERRY: President Current, Marvin, Members of the North Carolina Dental Society, Ladies and Gentlemen: It is certainly my very great honor to be invited to participate in your program.

You have certainly a most delightful spot here for a dental meeting, the most delightful I have ever seen. And with such fine people attending it and running it, I cannot understand how it could possibly ever be anything but a huge success. I am extremely happy and privileged to be asked to be with you.

ROENTGEN RADIATION IN DENTAL PRACTICE

Four of the fundamental properties of roentgen rays are:

1. They cause certain substances to fluoresce, thus producing visible light. This property is utilized in fluoroscopy and should be confined to medical usage; the limited advantages of dental fluoroscopy are outweighed by the dangers in its use. This ability to produce fluorescence of certain salts is also utilized in the intensifying screens of cassettes

whereby the visible light produced by salts on the screen supplements or "intensifies" the x-ray exposure.

2. They produce a change in photographic film similar to the action of light. A film subjected to radiation will show blackening when developed; this, of course, is the principle utilized in the production of roentgenograms.

3. They increase the electrical conductivity of air through which they pass. This is called ionization and is used as a basis for measuring and detecting radiation.

4. They produce certain biological changes in cells that may stimulate or retard growth. In some cases the cell may be destroyed or the form of new cells altered. This property is the principle upon which radiation therapy is based.

The chief principle utilized in the general practice of dentistry is number two listed above. All the while we are exposing films to roentgen radiation to produce an image of the underlying structures we are exposing our patients and ourselves to ionizing radiation which is capable of producing biologic changes in living tissue. This paper will deal with certain aspects of protection against these rays.

Primary Radiation and the Operator—The primary beam of radiation may be defined as that radiation generated at the focal spot of the x-ray tube and emanating from the cone of the unit. (The tube housing should be so constructed that primary rays can escape *only* through the window and cone.) While the operator should never expose any part of his body to the primary beam, we constantly are amazed at the number of skin changes seen on the hands of practicing dentists who have carelessly been tempted to hold films in patients' mouths during exposure. Such chronic exposure can only lead to trouble sooner or later. Since the endothelial lining of the blood vessels is the most radiosensitive tissue in the finger, it is the tissue damaged first. Early changes are inflammation and thrombosis of vessels; as the blood supply becomes increasingly diminished the outer tissues are deprived of sufficient nutriment and change accordingly. The nail bed and cuticle often show the first signs of danger through brittle, striated, cracked nails, and painful "hangnail" formation. Epithelial and connective tissue cellular changes occur simultaneously and may lead to necrosis or malignant changes. Such a result is the more pitiful because it is so unnecessary. The solution is simply to stand behind the tube and "never hold the first film." Because the reaction to radiation is not dramatic or immediate it is easy to fall into bad habits which may only show their effects when it is too late.

Primary Radiation and the Patient—This phase of the problem is omitted in this discussion, not because it is unimportant but because time will not permit. Reference is made, however, to recent research in this regard.¹

Secondary Radiation and the Operator—Secondary radiation is that radiation caused by the primary radiation striking some matter. Since the quality of the secondary radiation is dependent upon the atomic number of the material it is usually quite different (not as penetrating) as primary radiation. *But*, it is roentgen radiation and in sufficient quantity can produce biologic effects. The chief source of secondary radiation in the dental office is the patient's head (although any other object struck by the primary beam may produce it; e.g. bracket table, headrest, well, etc.). The overall effect is that secondary rays are given off in *all* directions from the patient's head.

The weekly tolerance dose of radiation for the operator and office personnel is .3r per week. We may protect ourselves from exceeding this dosage by interposing either a lead screen or sufficient distance between the operator and the head of the patient. While the lead protective barrier is the safest procedure, it is not always practicable in every dental office. In its absence the operator must stand a safe distance from the patient. From direct measurement² it has been found that at a distance of 2 feet from the patient's head the operator may safely expose 15 full mouth sets per week; at 35 inches a permissible 30 sets per week; at 60 inches a permissible 50 sets per week. (Sets refers to a series of 14 intermediate speed film at an 8 inch target plate distance.)

Since more critical means of detecting changes due to radiation may be developed, the weekly tolerance dose may have to be reduced. It would, therefore, be best to stand 4 to 5 feet away; this should be sufficient to expose all of the films required in most dental practices, and can be accomplished easily in most dental offices by having an eight foot cord on the timer.

Changes brought about by secondary radiation are insidious: reduction in blood cell count, changes in blood cell morphology, dermatitis, and possibly lymph and sex cell changes.

Monitoring for secondary radiation can be accomplished by an ionization chamber, but more practically in the dental office by subscribing to a film badge service. Such a service supplies badges containing a fast and slow dental film which are worn for a week and sent in to the laboratory. Here the films are developed with control films exposed to known amounts of radiation and compared in a densitometer. A report is then sent to the dental office stating the number of milliroentgens to which each badge was exposed during the week.

Dental Treatment for Patients Undergoing Therapeutic Doses of Radiation—The great emphasis placed upon early detection of malignancy has resulted in a higher incidence of radiation treatment about the face and jaws. Such therapeutic doses produce damage to the blood supply to the teeth, bone, and gingiva. Surgical procedures in such areas might result in a necrosis of the bone known as osteoradionecrosis. The rule of thumb is that no surgical procedures should be attempted in such a field for at least five years after the treatment.



Dr. Brauer, Dean, pauses to look over table clinic presented by U. N. C. School of Dentistry students.

Since many patients will not volunteer the history of previous radiation therapy to the dentist, it must be the responsibility of every dental practitioner to include a question on past history of x-ray or radium therapy about the face and jaws for each new patient. If the patient gives such a history the dentist should then contact the radiologist who gave the treatment for a complete report on reason for treatment, area treated, etc. and recommendations as to what areas (if any) may be subjected to surgical treatment.

Likewise, the radiologist contemplating radiation therapy for a patient may consult the dentist and recommend that certain teeth be removed prior to the treatment. In any event, close cooperation between the dentist and the radiologist are essential in preventing osteoradinecrosis.

SUMMARY

1. Four of the fundamental properties of roentgen rays are listed.
2. While exposing dental x-ray films the operator and office personnel may be exposing themselves to radiation.

3. To protect himself from primary radiation the operator must stand behind the tube and "never hold the first film" in patient's mouth.
4. A lead protective barrier is the safest means of protection from secondary radiation. In its absence, the operator should stand at least four feet from the patient's head during exposure.
5. Commercial film badge services are now available to private practitioners to provide quantitative measurement of radiation dosage in the dental office.
6. The dentist should routinely question each new patient concerning a history of radiation therapy about the face and jaws.
7. Close cooperation between the radiologist administering radiation therapy and the dentist is essential.

Bibliography

1. Nolan, W. E. and Patterson, H. W. "Radiation Hazards from the Use of Dental X-Ray Units." Unclassified Report from University of California Radiation Laboratory.
2. "New Safe X-Ray Dose and Dental Techs.," Medical News Letter, Bureau of Medicine and Surgery, United States Navy. Vol. 13, No. 1, pp. 23-4. Friday, 14 January 1949.

PRESIDENT CURRENT: Dr. Berry, we have had Dr. LeRoy Ennis down with us on a number of occasions, and I have heard many members of our Society ask the question: where did he get all his knowledge?

I think you have to a great extent answered that question for us. We are grateful for the way in which you have presented your subject. We hope you will stay with us, and we will try to lighten your heart a little before the evening closes.

Thank you very much.

DR. BERRY: Thank you, sir, very much.

PRESIDENT CURRENT: A drawing for prizes appears on our program at five o'clock. The prizes this year will be the best that they have been, I think, in the Society's history.

You notice the time of the banquet and the remaining entertainment for the evening. I hope everyone is going to relax and have a most excellent evening of enjoyment and fellowship.

The meeting is adjourned.

(The meeting adjourned at 4:20 o'clock p.m.)

ANNUAL BANQUET

Tuesday Evening, May 19, 1953

The Ninety-seventh Anniversary Meeting Banquet of the North Carolina Dental Society convened at seven-thirty o'clock, p.m., Dr. Amos S. Bumgardner, Toastmaster.

The invocation was given by Dr. Dale Arthur of Charlotte, N. C. Following this dinner was served.

TOASTMASTER BUMGARDNER: I want, first of all, to tell you who I am. I am Amos Bumgardner and I was born in Caser, North Carolina. That is six miles from Polkville, and Polkville is four miles from Hollis, and that is right below Ward's Gap. Ward's Gap is halfway between Caser and Talooka. Now I know everybody knows where I was born. It is a good place to be from, and when my father left there, most of the inhabitants were gone.

It is a happy privilege to meet such a fine group of people here and such an orderly group. I do not know whether you are just worn out or whether you are just relaxed.

We have a fine program for you tonight. These folks have gone to no end to get fine entertainment for you. I hope you enjoy it.

I should like to begin the evening by presenting the guests. We will have the entertainment next, and then go into the general program. It is now eight-thirty. We will start the dance as soon as we get through.

It is my happy privilege to have dinner this evening with one of the fine, great ladies whose grace and charm have lent dignity and charm here, and whose husband served with distinction and national prominence throughout the land of America. It was my privilege to receive the honorary degree of a Fellow of the American College of Dentists just before he passed on. At that time he was the President and signed my degree. I shall be eternally grateful.

Just two years ago he stood on this platform and we honored the man, Dr. Henry O. Lineberger. Tonight it is my privilege to present to you our first guest, Mrs. Henry O. Lineberger, the President of the North Carolina Dental Auxiliary.

Mrs. Henry O. Lineberger!

You will hear them publicly presented in just a few minutes, but at this time I should like to say to you, as we say to the President of the United States: The President of the North Carolina Dental Society and the First Lady, Dr. and Mrs. Alfred C. Current, Sr!

You will hear from him a little later, but the man who battled the tide of Niagara Falls, who won the Republican place in the House of Representatives, our speaker, who will be presented later, Charles Raper Jonas!

The woman who has kept me poor and rich, who ties my tie. I do not mind working free, but she does.

I give to you my very dear beloved wife, Anne Elizabeth Bumgardner!

Next on my right is a charming couple. The years have gone along, we have learned to enjoy their fellowship, their comradeship, and the hospitality of one of the most vivacious couples that come our way. This man has distinguished himself, as has this lady, whom we shall hear from later.

I should like to present at this time Dr. and Mrs. Darden Eure of Morehead City!

Our very honored and distinguished guests, whom you are having the privilege of honoring tonight, a man who has served us and a man who will be presented at a later time, and his wife, Dr. and Mrs. Ernest A. Branch of Raleigh!

The man on my right is the man who will take the gavel tomorrow morning about twelve o'clock, if nothing unforeseen happens, and shall guide the destinies of this institution through the next twelve months.

Dr. and Mrs. Neal Sheffield of Greensboro.

The man and lady who have made this program of entertainment possible, and who have certainly worked with so much diligence and detail. The Chairman of the Entertainment Committee, Dr. and Mrs. Grady Ross of Charlotte!

On my left, this grey-haired gentleman who sits in such quiet solemnity, hails from Hillsboro, North Carolina. It is almost as large as Caser, I saw it one time. This man has come to Charlotte and is one of our great leading men, and he will present our speaker of the evening, Dr. Ralph Franklin Jarrett of Charlotte.

They say when you meet a man and are introduced to him, that you think you know him, but that it is when you work with him you really understand him. The next man I have the privilege of presenting is the man whom you last night elevated to President-Elect and who for three years under the presidencies of myself, Dr. Current, and Dr. Fred Hunt, has served as Secretary-Treasurer and has done a noble job.

I should like now to present Dr. and Mrs. Bernard N. Walker and their little daughter, Frances Ellen Walker, of Charlotte!

Here is another man who was born in a great city, Ur, North Carolina, six miles from Concord. Concord is twenty-two miles from Charlotte. That locates him. He went back to that metropolis and married a lady from that same great city. He will have further duties of the evening.

I now recognize my distinguished colleague and friend and neighbor through these many, many days and years of joy and toil and sorrow and happiness. I know of no man who has meant more to me as we walked together than Dr. and Mrs. John Pharr of Charlotte!

Some people came a long way, and those are the people who were born in Stanly County, Albemarle, North Carolina. Here is our distinguished Vice-President. He has been practicing thirty-six years. That is not so very long when you are looking backwards, but that is a long way when you are taking an examination and are studying. You thought four years would never pass when you were going through school, but when you look back upon those four years, they seem but the fleeting glimpse of a passing day.

We have tonight the honor of presenting our Vice-President, Dr. and Mrs. C. I. Miller of Albemarle.

The next distinguished man who will do some of the honors later this evening is a young man who hails from Lawndale, North Carolina, Dr. W. F. Yelton of Winston-Salem!

We have had very few men who have distinguished themselves in the field of dental education and dental surgery as has this one of our beloved citizens of this state. I always look upon him with reverence and appreciation because he is one of the men who has ever brought us national honor. I saw him in San Francisco where there must have been six thousand people present in the Great Hall, and you could not even get about the place, it was so enormous. I could look up into the eyes of the great leader of that day, and it did my soul good to know he came from North Carolina, and he preached North Carolina throughout the whole nation. He went to the smaller states because he came from a smaller state, one that had only four men in the House of Delegates of 378 delegates. Yet he drew sufficient courage and power from it to become the President of our national institution. He served in every capacity. He supported the state and national representatives and men do him honor as we all know.

I present to you Dr. Clyde Minges of Rocky Mount. Dr. Clyde!

Immediately in front of me is Frank Alford. You may not know that he has had so many, many national honors, and all the state honors. He has served on the State Board of Dental Examiners. I do not know how long he was on when I took the Boards. I was just a young chap, then—of course, I still am.

I should like to present to you a man who has honored our state, who has served with distinction, and who is a national man, Dr. Frank Alford of Charlotte. Dr. Frank!

Around the table over there is a man who is a member of the Board of Trustees of the great University of North Carolina, who is in the Senate of North Carolina. He is President of the Dental Foundation. I do not know when he earns a living, but I have never seen a man who gives more unselfishly of his time to this great work which we all love so dearly.

I should like to recognize at this time, Paul Jones of Farmville, North Carolina. Paul! (Applause.)

Sitting right behind Clyde Minges is a man who began his practice back up in the western part of this state in the town of Morganton. He has

worked hard through these years. He married a lovely Lady and she has kept him straight. Last night they elected him Secretary-Treasurer of this great organization. He takes over at the conclusion of this meeting.

I should like to present to you my friend and your servant for the next year, Dr. and Mrs. Ralph Coffey of Morganton.

If a man does a good job on the State Board of Dental Examiners he always gets re-elected.

I should like to present to you Dr. and Mrs. E. M. Medlin of Aberdeen. Dr. Medlin was re-elected to the State Board of Dental Examiners last night.

On this side is the man who brought the speaker from Raleigh here, Mr. Ed Cannon.

Immediately on my right is the Editor-Publisher and the Mrs. Editor-Publisher of our DENTAL JOURNAL. I should like to tell you now, a person who has never been close to it never understands how much work is entailed. I do not see how they get any rest, but I guess they do.

Dr. and Mrs. Marvin Evans of Chapel Hill.

Dr. and Mrs. Thomas Blair. He is the Chariman of the Out-of-State Visitors Committee. They are from Winston-Salem.

Dr. and Mrs. Bill Sherrod. Mrs. Sherrod is Treasurer of the North Carolina Dental Auxiliary.

Dr. and Mrs. T. Edgar Sikes of Greensboro. Mrs. Sikes is the incoming President of the North Carolina Dental Auxiliary.

Here is Dr. Harrison M. Berry from Pennsylvania. He is one of our major essayists. Dr. and Mrs. Berry!

Dr. and Mrs. S. E. Moser, at the first table. He is the Chairman of the Program Committee!

Dr. and Mrs. Abernethy of Hickory, and their little daughter. He is the Chairman of the Arrangements Committee.

Dr. and Mrs. H. Smith of Gastonia. He is the co-Chairman of the Entertainment Committee. (Applause.)

On my left are Dr. and Mrs. Hair, and Dr. and Mrs. Higgins, our guests from Spartanburg, S. C.

Dr. and Mrs. Finn, and Dr. and Mrs. Fields, of Johnson City, Tennessee!

Dr. and Mrs. H. M. Bennett of Youngstown, Ohio!

Dr. and Mrs. L. M. Davenport of Jefferson City, Pennsylvania!

I believe that takes care of our distinguished guests.

I did want to bring in one other group. I think so often the work-horses of our institution are overlooked. The Executive Committee of the North Carolina Dental Society is still in action when this convention closes: I. R. Self of Lincolnton; Dr. Homer Guion, Chairman of Charlotte, and Dr. Paul Fitzgerald, of Greenville, North Carolina. If they are in the room, I wish they would stand.

Dr. P. L. Connors of Youngstown, Ohio!

Dr. Howard Hayden of Youngstown, Ohio!

Mrs. Ralph Coffey, President-Elect for the next year of the North Carolina Dental Auxilliary!

We have many other distinguished guests, I am sure, but at this time I should like you to turn, in your folder, to the word "Entertainment." We have arranged a little different entertainment. We had some of the ladies playing croquet, some pitching horseshoes, so we went back into the Nineties. Therefore, it seemed a little appropriate for us to put on a program called, "The Gay Nineties."

I recognize at this time some members from Charlotte, North Carolina, called the "Gay Nineties." Will you please come in and take over?

(Entertainment.)

TOASTMASTER BUMGARDNER: You have just been listening to Metropolitan opera. (Laughter.) I am glad you received it in so enthusiastically.

I recognize Mrs. Darden Eure at this time.

Mrs. Eure!

MRS. DARDEN EURE: Thank you, Dr. Bumgardner. I am grateful for this opportunity to speak to you.

I reckon you know what an opportunist is. This young nurse, a very pretty, brown-eyed, attractive woman, was taking care of the first aid for the boys as they came back from the front in the last World War. She was trying to make each one very comfortable, so she said to the first boy, "How many of the enemy did you kill?"

He said, "Me, I killed eight."

She said, "How in the world did you kill them?"

He said, "I killed them with this very fist of mine."

So she took his fist in her hand and caressed it and kissed it eight times.

The boy in the next cot was taking note of that. She came to him and said, "How many of the enemy did you kill?"

He said, "Me, I killed twenty-five."



Mrs. H. O. Lineberger, (right), Raleigh, retiring president of the North Carolina Dental Auxiliary, is shown here receiving a silver bowl presented to her by members of the Auxiliary at the Pinchurst convention. Presentation was made on behalf of the Auxiliary by Mrs. Darden Eure, Morehead City, immediate past president.

She said, "You did? How in the world did you kill twenty-five?"

He said, "Why, I bit their heads off!"

Thus, I am an opportunist. I am very glad to be here tonight to speak for the members of the North Carolina Dental Auxiliary. We are honoring one tonight who helped her husband charter the ship of the North Carolina Dental Society through both calm and turbulent seas, ever his confidant and ever his counselor.

With that background in mind, the women of the North Carolina Dental Auxiliary felt safe and secure when she took over the reins of the presidency, and our faith was not misplaced. She has given us a three-dimensional program. Through her intelligent guidance the horizons have been pushed back, the mist has lifted from the hills, and we see a deeper, a higher, a broader acme of service than ever before.

Due to the fact that we have along with us tonight our speaker, I want to paraphrase Abe Lincoln in just a few words: "You will not remember what I say here tonight, but the service that this woman has rendered to the North Carolina Dental Auxiliary shall long be remembered and shall be a bright spot and an inspiration to those who follow her."

Our appreciation is only overshadowed by our love and pride for you, Anne Lineberger!

(A gift was presented to Mrs. H. O. Lineberger.)

MRS. DARDEN EURE: Mrs. Lineberger, I want you to accept this gift as a token of our appreciation for what you have meant to us this past year.

MRS. H. O. LINEBERGER: Thank you, Jacqueline.

It has indeed been a joy to have been of service to the North Carolina Dental Auxiliary this past year. We are shooting at some high goals. We have gone three years along the road. We shall continue to go. We shall always hold by the principles of dentistry at its best. Thank you!

TOASTMASTER BUMGARDNER: Thank you, Mrs. Eure and Mrs. Lineberger.

I now recognize Dr. W. F. Yelton of Winston-Salem.

DR. YELTON: Mr. Chairman, President Eddy, Distinguished Guests, Ladies and Gentlemen: First I should like to thank the members of the North Carolina Dental Society for the privilege of making this presentation tonight. I feel that there are many of you who could make this presentation far better than I. Many of you, like myself, have worked for this great man whom we honor tonight, and are aware of his many achievements and what they have meant to dentistry in North Carolina. For a man who has given so much to his profession, I think it only fitting that we review, briefly, his history and some of his many accomplishments.

Dr. Ernest A. Branch was born in Lumberton, North Carolina, May 16, 1888. He attended the public schools in his county, Oak Ridge Institute, North Carolina State College, and was graduated in dentistry from the Atlanta Dental College in 1913. From 1913 to 1922 he engaged in the private practice of dentistry in North Carolina. In 1922 he became the children's dentist for the Raleigh and Wake County Boards of Health, in this capacity he served until 1927, when he again entered private practice in Raleigh, making a specialty of children's dentistry.

Because of his love for children and his outstanding record as a children's dentist in the Raleigh and Wake County Boards of Health, it is no wonder that he was asked by the State Board of Health to become Head of the Division of Oral Hygiene in 1929. He accepted this great challenge and as all of you know, is still serving admirably today as Head of this great division of our State Board of Health.

Dr. Branch has written numerous articles that have been published by the NORTH CAROLINA BULLETIN and the American Dental Association journals. He has made many speeches on subjects pertaining to his work before health groups, civic clubs, dental societies, and parent-teachers associations in this state and many other states. As Director of the Division of Oral Hygiene of North Carolina he has worked out a plan of dental health education that is recognized in dental, educational, and public health circles as the most successful and effective program of its kind in the nation.

Another of Dr. Branch's many accomplishments was the founding and directing of the Institute of Public Health Dentistry at the University of North Carolina from 1936 to 1942. This also was the first program of its kind in the nation.

Last year Dr. Branch was presented the Carl V. Reynolds award by the State Board of Health for his inspiring leadership and untiring leadership in the fluoridation of the waters of North Carolina.

On November 7, of last year he was selected to become a member of the Founders Group of the American Board of Dental Public Health.

Dr. Branch is a past President of the North Carolina Dental Society. He served as Chairman of the Oral Hygiene Section of the American Dental Association in 1935 and was a member of the Maternal and Child Health Advisory Committee of the United States Department of Labor from 1936 to 1938.

Dr. Branch is a past President of the American Association of Public Health Dentistry, the North Carolina Association, and the State and Territorial Dental Directors.

These are but a few of the many outstanding accomplishments and honors that have come to Dr. Branch.

To bring my remarks to a close, I should like to quote from an article which appeared in the NORTH CAROLINA HEALTH BULLETIN in

March 1952, entitled, "Dr. E. A. Branch, Appreciation by Dr. J. Martin Fleming of Raleigh."

"In writing about Dr. Branch, it is hard to confine your remarks within any reasonable boundaries. You are writing about more than an individual. He is an institution in himself. He has done more to make the state dental-health minded than all other agencies combined. It is no wonder that he holds the individual devotion and cooperation of the dental profession of North Carolina, because the profession has the full knowledge and assurance that the dental health program is in good hands."

Dr. Branch, I am sure that every person here tonight wishes for you a long life of continued usefulness in this, your well-chosen work.

Would you please come up, sir? (Prolonged applause.)

Dr. Branch, for your great contribution to dentistry in North Carolina, I present you on behalf of the North Carolina Dental Society, this beautiful hand-engraved aspic platter. (The audience rose and applauded.)

DR. ERNEST A. BRANCH: My friends: I cannot say this took me by complete surprise. I found out about it the morning we started down here. I had not read the Bulletin thoroughly, and Miss Emma told me I ought to borrow one of these "Jim Swinger" coats, or something, for the special occasion. I asked her what it was all about. Then she told me.

Hearing Bill read all this reminds me of a story I heard some time ago about three bulls. I ought to tell it to you. These three bulls got together and were talking a little bit. They decided they would go down the road to see what they could see and find, things like that. They started off and this old bull, after a while, was tired. He said, "Fellows, I am tired, let's stop under this sweet gum and rest a little."

These other two bulls said, "We aren't tired. We're going to go on." So they went.

After a while, that middle-sized bull said, "Buddy, I'm getting a little tired. Let's lay down here in the creek and cool off." And he lay down in the creek.

But that other little bull, the little one, you know, just went on, and on, and on, and on.

I would say the moral to that is, sometimes a little bull will go a long way.

I wish I could tell you, friends, just exactly what is in my heart. I cannot do that. I have tried ever since Miss Emma told me about this coming off, to think of something nice and appropriate to say. If I could just turn my heart inside out and let you fellows see it, I would not have to say a thing. I want you to know how much I appreciate it. Living and working here with you folks as long as I have, with everything running smoothly, as it has, I have known that I had your love. You certainly have mine. I hope



Dr. Ernest A. Branch, Raleigh, who has headed the Division of Oral Hygiene, State Board of Health, for almost a quarter of a century, was honored by the North Carolina Dental Society at its banquet session. Here Dr. Branch, center, is receiving the gift from Dr. W. F. Yelton, right, Winston-Salem, who made the presentation in behalf of the society. The two others looking on are Dr. Amos S. Bumgardner, Charlotte, past president of the society, and Mrs. A. C. Current, Gastonia, wife of the retiring president.

we can keep up just like that, there is no reason in the world why we shouldn't.

In your honoring me in this Testimonial tonight, you are honoring more than just Uncle Ernest. You are honoring Miss Emma too. I want her to stand up.

(Mrs. Ernest Branch rose and was applauded.)

DR. ERNEST A. BRANCH: Every time I moved a wheel, she moved the chalk. If I did not move fast enough, she would get around some and move the wheel too.

Then, too, you honor the staff of fine boys, and the office staff I have had to help me. Without their help and cooperation and the hard work they have done, we would not have had an opportunity to stand here tonight and have you folks do this nice thing. Therefore, I want you to know that I thank you from the very bottom of my heart. (Prolonged applause.)

TOASTMASTER BUMGARDNER: Thank you, Dr. Branch, for that tribute of respect. It is a privilege to honor the men who have worked so diligently and unselfishly.

I now recognize Dr. John Pharr.

DR. PHARR: Mr. Toastmaster, Distinguished Guests, Members of the North Carolina Dental Society, Ladies and Gentlemen: It is my pleasant privilege at this time to present to you a very lovely and striking family group. This group is composed of members of the immediate family of our distinguished President. We welcome them on behalf of our society, and I now want to introduce them individually.

We have at the head table the Wife and Mother. By her poise, graciousness, and unfailing good humor she is due the full credit of an equal partner in her husband's rise to social and professional leadership. Of this couple it may be aptly said:

"As unto the bow the cord is
So unto man is woman.
Though she bends him, she obeys him
Though she draws him, yet she follows
Useless each without the other."

It is with pride and pleasure I present Mrs. A. C. Current, Sr. Mrs. Current, will you please rise and remain standing until my introduction is completed?

(Mrs. A. C. Current, Sr., rose and was applauded.)

DR. PHARR: Will the following children of this couple please stand to be recognized as they are introduced:

Dr. and Mrs. A. C. Current, Jr. Ace, as he is known, is practicing with his father in the City of Gastonia.

Myra Current Doster and her husband, Oscar. She is a student at Meredith College, and he is a student at State College.

Miss Mollie Current is a rising senior at Gastonia High School, and her escort is Mike McGinnis.

William Ange, or better known as Bill Current, is taking his pre-dental work at the University of North Carolina.

Ladies and Gentlemen: The family of our distinguished President, Dr. A. C. Current, Sr. (Prolonged applause.)

And now, with your permission, I want to say a few words about the husband and father.

"Eddy" as he is affectionately known to most of us, has had all the honors North Carolina dentistry can confer upon him. He has been President of his local society, President of the First District Dental Society. There has hardly been a year since he began the practice of dentistry in 1923 that he has not served on one or more important committees of his local, district, and state dental societies. He served seven years on our State Board of Dental Examiners. He at present is a member of the State Board of Health, and continuously has served and is serving innumerable civic, religious, charitable, and other groups in his home town and throughout the state. He is a Fellow in the American College of Dentists.

His modesty, integrity, loyal service, wise counsel, and ever-ready smile in all of these activities have endeared him to everyone wherever he goes. No other words seem to fit Eddy so well as those of the renowned scholar, Samuel Johnson, who wrote of Oliver Goldsmith, "He touched nothing that he did not adorn."

In grateful recognition for these and many other outstanding achievements as a father, as a citizen, and as a leader in the dental profession and as an outstanding advocate of better dental education in the state of North Carolina, I proudly present to you, on behalf of 1040 of your fellow North Carolina dentists, this Past Presidents' Emblem.

(The Past Presidents' Emblem was presented to President Current.) (Applause.)

PRESIDENT CURRENT: Dr. John, you long-nosed countryman—that is what I call him when I send him patients. (Laughter.)

Toastmaster Amos and Friends: When I say friends, that is it. I have no enemies in this world, nor shall I ever have. Thank God I have risen enough to keep jealousy and enmity out of my heart. The members of this North Carolina Dental Society share much of the honor for making me man enough to do just that thing.

As long as I wear and look upon this Past Presidents' Emblem, I shall be reminded of your beautiful and loyal and more than kind gratitude toward me for my feeble efforts to serve you as your President. And it will

constantly remind me of you, it shall inspire me to ever wear it in a manner, so far as God may help me to do it, that will reflect dignity upon the profession I love with all my heart. (Applause.)

TOASTMASTER BUMGARDNER: It is inspiring to listen to the tone of respect as we pay homage to these great soldiers as they go down the firing line. The tracks which they leave shall be ever permanent in the annals of history throughout the Southland and throughout this nation. I am sure when the pages of time are written and the records are folded away, that this man's name shall stand as one of the great philosophers and workmen who is driving ahead, and for whom still lies many years of full-time service and heritage to this beautiful state.

It is a privilege to salute the man who has given every ounce of full devotion to this beautiful service. (Prolonged applause.)

I now present Dr. Ralph Jarrett!

DR. JARRETT: Mr. President, Mr. Toastmaster, Ladies and Gentlemen: There comes a time, even in the nation, when good men must take hold of the helm for better government. Tonight, we are distinguished with the presence of one of the men who allied himself in his platform to help right the wrongs that have slowly crept into the lives of the political machines of our nation.

He needs very little introduction, but there is one thing that we have in common. We are both Republicans.

We have, tonight, one of the busy men of our Congress who is fast providing and bringing to actuality the things that he promised when he ran for this office. Thus, I present to you now a fellow North Carolinian, Charles Raper Jonas of Lincolnton, a graduate of the University of North Carolina. He is now the Tenth District Congressional leader.

Mr. Jonas!

(The audience rose and applauded.)

MR. CHARLES RAPER JONAS: Mr. Toastmaster, Dr Current, Dr. Walker, Ladies and Gentlemen: I feel very much as Mrs. Eure said she did.

There are at least three reasons, ladies and gentlemen, why I do not intend to impose upon your good nature with a lengthy speech tonight. The first reason, and perhaps it is the most important, is that the President of the United States is speaking to the people of the nation tonight at ten o'clock over the radio. He has a message to deliver to the American people that every American citizen should hear. I certainly hope to conclude my part of the program in time for you to hear him. if you have any desire to do so.

The second reason is that I have to catch a train. I have to leave here about ten o'clock to catch a train back to Washington. When your kind invitation was received to appear on this program, I very readily accepted.

You know, it is easy to accept an invitation to do something two or three months ahead. Then, as the day of this event approached, I began to be jittery about it, because we are, right now, in Washington, working on the budgets.

I happen to be on a committee which is charged with the responsibility of screening the budget requirements of thirty separate Government agencies. When I left the capitol this afternoon about two o'clock to catch the plane to come here, I had to excuse myself from a meeting of this subcommittee listening to the commissioners of the Atomic Energy Commission undertake to justify their requests for appropriations exceeding 4 billion dollars for the current year. I raced out to the airport and came to the Durham-Raleigh airport, picked up my warm friend, Ed Cannon, the Secretary of the North Carolina Bar Association, and had him drive me down here. He has the car cranked up ready to leave promptly at ten: I must be in Washington at eight o'clock tomorrow morning to attend a breakfast meeting at which the Secretary of Defense will make a talk about the nation's security.

That is the sort of pace an ordinary and typical Congressman undertakes to fulfill during these trying and hectic days through which we live.

The third reason I will not undertake to make a speech is because of one thing I have learned during the three and one-half months I have been in Washington. It is when not to make a speech. I would not even dream of undertaking to make a speech after the sort of program you people have had tonight. I could not certainly follow the delightful program presented by the "Gay Nineties." I was all set to pay a tribute to them, and to give you my apologies, when along came a part of the program that was even finer than that one. I have never listened to such sincere tributes of praise and respect to the leaders of any profession as I have heard here this evening.

I do not know many of you in the audience, but I do know Dr. Eddy Current. He is a neighbor of mine. He lives in Gastonia, and I am from Lincolnton, as you have already been told. Our paths have crossed frequently. I should like to subscribe to all that has been said about him here tonight. He is in the class of the prophet who is supposed to be without honor at home. But, he is honored and respected at home as you people abroad have given him your respects here tonight.

I was particularly pleased that you invited me to have a place on this program at a time when you would have the wives present. They have added a festive note to this occasion. It would have been a drab affair had they not been present.

I shall never forget the definition given by a young law student when the professor asked him to define a fee. You know, the term "fee" is a term to describe the status in which land is held by the owner. But the young college law student defined it as he responded to the professor's inquiry, with this little sentence. He said, "There are fees simple and simple fees, and fees that do entail, but the greatest fee of all the fees is the female."

I certainly subscribe to that sentiment and I know you do too. I wonder if you have ever spent any time considering the derivation of this word "woman." I was reminded of this definition given by a poet when Dr. Pharr read the beautiful sentiment that he did in his remarks. A poet, undertaking to tell us where the word "woman" came from, did it this way. He said:

"When Eve brought woe to all mankind,
Old Adam called her woe-man.
But when she wooed with love so kind,
He then pronounced it woo-man.
But now with folly and with pride,
Their husbands' pockets trimming,
Ladies are so full of whims,
That people call them whim-men."

I conclude my own investigations into that subject by deciding for myself that the term "woman" was arrived at because woman, of course, was taken out of man and it was, therefore, "women." I suspect all of the men here tonight will agree with me that what woman has taken out of man during these twenty intervening centuries has been aplenty.

Seriously, though, women have been the inspiration of all the fine and noble things that men have done since the beginning of time. And I should like to express the hope to the men here assembled that each of you will always have by your side "a perfect woman, nobly planned, to warm, to comfort, and to command, and yet a spirit still and bright with something of an angel light."

Now, ladies and gentlemen, in the few minutes that I shall speak to you, I should like to try, if I can, to sort of streamline what I had in mind saying to you on this occasion. I notice on the Program that I am scheduled to talk on the subject, "Report from Washington." That is a subject on which I could talk at considerable length and never exhaust the subject. Much is happening in Washington these days to interest the people back home, and it is my custom once a week to send a newsletter to the newspapers of my own district, in which I try to keep them abreast of developments in the nation's capital.

People all over the country are genuinely interested these days in at least three very serious problems that beset our country:

Of course, the first and paramount problem, and the one which is in the minds and hearts of all parents, at least, and all of the young boys and all of the young girls, too, so far as that is concerned, is what is going to happen about the war and what is going to happen to us in our international affairs. Well, I am not a prophet and I do not intend to even try to prophesy tonight.

If there are any newspapermen in the audience, I hope they will not quote me as saying I expect a cessation of hostilities in Korea—but I do. I think perhaps before the summer is out there will be a truce or a cessa-

tion, at least, of hostilities in Korea. All the evidence points that way. However, I do not care to make a prediction about it because too many politicians are in the habit of going about making predictions that never come true. Then the people, sooner or later, lose confidence in their judgment. Therefore, I do not care to be considered as undertaking to prophesy at all. However, if I had to express a judgment about it, I would say there is a very good possibility that the war in Korea would be over before the summer is out.

However, let me hasten to say that will not end our problems. We should come to a meeting of the minds with respect to the only remaining question: the difference between the contending forces in Korea. That will not mean the cold war is over by any means. That will not necessarily mean that there has been a fundamental change of heart on the part of the leaders who are in control in the Kremlin. And until we can be sure there has been a fundamental change of feeling and heart on the part of those leaders, we cannot afford to let down our guard.

That is the reason why we are going, in my opinion, to have to continue to maintain a high level of defense in this country. Not for the next year or two, but perhaps for a long pull. As I analyze this situation, it seems to me that we are not in a 100-yard dash, but we are now running a cross-country race. That is the reason the leaders in the Administration have re-examined our budget requirements for defense.

Let me hasten to say that I hope you will not be too alarmed at the protests you read daily in the columns written by newspapermen, columnists, and the radio reports of the commentators who would scare you into believing that you have an Administration in Washington that would be willing to take any chance with the security of this country. The people in charge of the Administration in Washington, in my humble opinion and according to my best belief, are just as genuinely interested in the defense of this country as X, Y, or Z is, who may happen to be broadcasting or writing a column in the newspapers. The only difference is that we have, at the Defense Department, one of the outstanding business leaders of this country. He is a man who is willing to enter Government service at great personal sacrifice, a man who has demonstrated his ability as the head of one of the greatest corporations in this country, as the production genius in that corporation.

It is my theory, and I think you can afford to play along with it at least until you have some evidence that it is not sound, that we can have just the same sort of defense by spending less money if we will spend our money wisely and prudently. I have been on the Appropriations Committee of the House long enough to know this one thing: it is that you can cut down on the spending of every agency and department and bureau of this Government without seriously impairing its efficiency. It takes a while to do it. It takes ability to do it. It takes a person who knows how to build an organization and develop efficiency by the practice of economies. I have always contended (and this is borne out and will be attested to by those who

scrutinize the budgets) that money can be saved in the Defense Department of this country just as easily as it can be saved in the Commerce Department, the Post Office Department, or any other branch or bureau of this country.

So, do not be too alarmed when you are told and when you hear that those in charge of your country are willing to take any chances with the security of this country. They believe—and I think this is a sound view and I hope you agree with it—that we must have a sort of balance between national security and national solvency, and we must consider a program and institute a program which we can maintain over a number of years until there is an end of these tensions and strains and these threats of war.

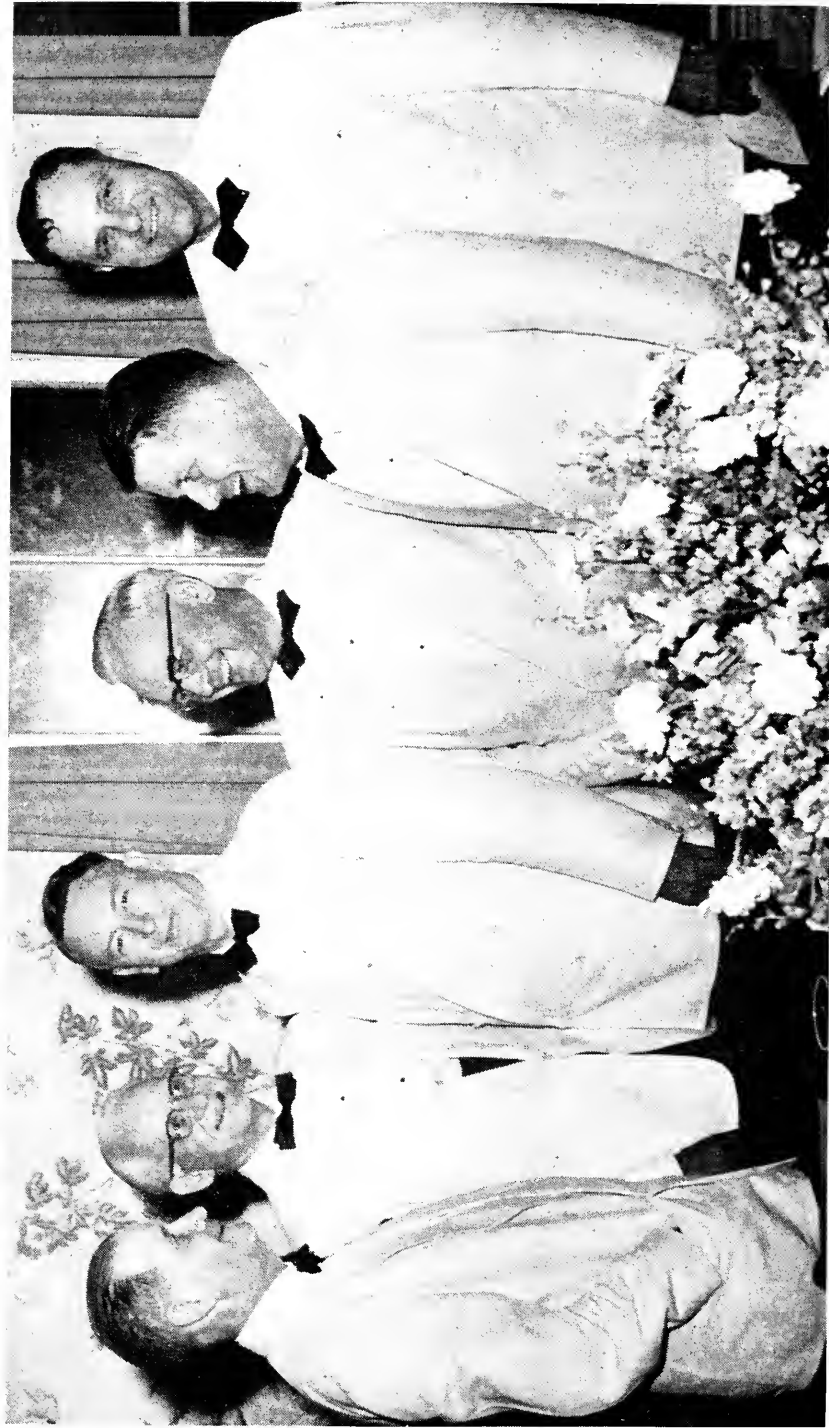
It would be a mistake, I think, to fix a target date next year and bend our every effort and exhaust our country financially in order to meet that target date, and then have a lot of our equipment become obsolete due to the increasing efficiency and to the new weapons that are daily being discovered, and to the progress we are making along technological lines. Thus, I am willing to go along with the Secretary of Defense, who takes the position that it would be better not to fix target dates, but figure that we are in a long-range emergency and fix a goal that we can maintain year after year. Then we should continue to build and expand until we have reached our maximum potential for defense.

There is another danger that confronts our country. It is the danger that we are going to exhaust ourselves financially. There is a point of no return. A government is just like any business or any individual. You can continue to spend more than you take in for a few years, but if you continue that program indefinitely, you know as well as I that you will go broke.

Well now, we are faced with a situation that is acute in that respect. Seventeen out of the last twenty years we, as a government, have spent more money than we have taken in. Twenty years ago the public debt of this country was less than 5 billion dollars. Today it is more than a quarter of a trillion dollars. Today the interest on the public debt is more than a billion dollars more than it cost to run the entire government twenty years ago. Yet it is proposed that we continue, as a government, to spend 75 or 80 billion dollars a year indefinitely.

Where is the money coming from? They say, "Tax the corporations." Well, you know as well as I know that corporations by and large do not pay taxes. Last year one of the biggest corporations in this country paid Uncle Sam more than a billion dollars in income taxes. But you know and I know that corporation did not pay those taxes. Every man who bought a Chevrolet, a Pontiac, a Buick, or a Cadillac automobile, paid those taxes.

"Tax the rich," they say. That is impossible. There are no more rich to tax. That may surprise some of you. But let me tell you something. If the Government would take a 100 per cent tax bite, confiscate all of the taxable income of every taxpayer in this country above \$100,000, it would



Shown with Representative Charles Jonas, principal speaker at the banquet are: from left to right, Drs. Neal Sheffield, Ralph Jarrett, Jonas, President Current, Secy.-Treas. Walker, and Toastmaster Bumgardner.

produce just 34 million dollars, and that would not run your Government but two and one-half hours, at its current rate of spending.

Confiscate all the taxable income above \$10,000 a year from every taxpayer in the country, and it would not produce but 8 billion dollars. That is not enough to run the Federal Government longer than a month.

Confiscate all of the net income above \$6000 a year. Take it all from every taxpayer in the United States, and it would not produce but ten billion dollars more. And that would not run the Government. That would not even make up the current year's deficit.

It has been estimated by the Treasury officials that in order to raise enough additional revenue to wipe out the current year's expected deficit, the Government would have to confiscate every dime of taxable income above \$4000 from every taxpayer in the United States.

No more money is to be gained. We have reached the point of diminishing returns. You can confiscate it all and still it will not be but a drop in the bucket in comparison with this colossal spending program in which our Government is engaged. What does that mean? It means that Mr. and Mrs. America must begin paying more and more taxes on the things they buy to eat and to wear. The Government can impose those taxes on more and more people, because most of them are hidden and they do not know they are paying them.

I do not like to talk about figures or statistics, and I know you do not like to hear about them. However, let me try to compare, briefly, what our Government proposes to spend in one year, to help you visualize how much 80 billion dollars is. That is what your Government expects to spend this year and will spend unless the pressure groups in this country discontinue the habit of bombarding the members of Congress and threatening them with results at the polls. Some Congressmen are weak enough to respond to those demands and are more interested in being re-elected than they are in working for the best interests of this country.

Now, 80 billion dollars is more than 160 million Americans spend in this country a year for food. It is thirteen times as much as all of us put together spend on education. It is forty times what all of us combined spend for religious guidance.

If every farmer in America would sell his farm tomorrow and all of his tools and his stock and his machinery and give the money to Uncle Sam, it would not run the Government more than three months. And if every home owner in America would sell his home tomorrow at its assessed valuation, and give the money to Uncle Sam, it would not run the Government but four months.

I say to you that there is a danger inherent in this situation that will affect the financial stability of this country. We have got to begin sooner or later—to match our outgo to our income. I am in favor of discontinuing

deficit spending, in favor of balancing the budget. And then I am in favor of considering tax reduction.

No man in America wants to reduce taxes any quicker than I do, but I think it is putting the cart before the horse to reduce taxes when we are faced with the financial situation that I have just described. That is the reason I laughed when someone spoke of this to me, when I walked into the room tonight. He did it in a joking way, but there was an undercurrent of real inquiry in his voice when he said, "Well, you have been up there three and a half months, and you haven't reduced taxes yet." I said, "Well, that's right, old fellow, you have to be just a little patient. We haven't been there but three and a half months."

He reminded me of the story they tell about the old guy who lost his wife, but had three daughters. These three daughters had married and the old gentleman was disappointed that neither one of them had presented him with an heir. He thought about the problem and he came up with this solution. He invited all three of the daughters and their husbands to Sunday dinner. As they sat there, and before he had offered thanks, he turned to them and reported his disappointment in the fact that he was not a grandfather. He said he had been thinking about the problem and he had decided to offer a possible solution. He had gone down to the bank one day before this, and he had deposited \$100,000 in the bank, and left instructions that this money was to belong to the first grandchild. He then said grace and he prayed a little longer than usual on account of the sort of affair it was.

Finally, though, he concluded his prayer and looked up, and the room was empty.

Just be a little patient. Give us longer than three and a half months to try to put this government on a sound financial footing, and to lay the foundations upon which a tax reduction plan eventually will be built.

I should like to discuss the third problem that confronts our country, but I have already gone a few minutes beyond my time. Let me just tell you a story to illustrate what I would talk about on this third aspect of this problem if I thought you would stand for it.

Three months after Yorktown, a great celebration occurred in New York City. It was a long-delayed celebration, the townspeople of the City of New York had waited expectantly ever since the surrender at Yorktown for the day of their own liberation. However, New York was the assembly ground for the British expeditionary troops scattered up and down our coast, and the celebration in New York had to wait until the troops could converge upon the city and until the transports could come to take them away.

Finally, the long-delayed and much hoped for day came to pass. The last of the 14,000 individuals, 8000 troops and 6000 Tories who were leaving the American shores to return to England, boarded the transports in the harbor and the last gangplank was raised. Then pandemonium developed

in New York City. All of the pent-up emotions of the people were unloosed. The merchants boarded their windows. The church bells rang. There was dancing in the streets, and such a din and such a noisy celebration had never occurred in this country before.

That night there was a grand dinner held in New York City. Governor DeWitt Clinton was the toastmaster and host at the dinner. General Washington was the guest of honor. There were thirteen toasts given at that dinner, one to each of the thirteen colonies—and another one. And it is the other toast that I am interested in. It was the second toast given that night. The first one, of course, was to the new United States of America. Then a man arose in the audience and proposed this toast.

“May we become one people, and in our close union guard the testimony we have erected here to liberty.”

May you heed and may I heed and may all Americans heed the injunction of the man who delivered this second toast. May we keep eternally on guard to see that we do protect the testimony that we have erected on these shores to liberty, because if America ever falls, it will not be as a result of a foreign sword or foreign invasion. If America falls it will be because we have crumbled from within. I think it was that thing that Abraham Lincoln had in mind when he said, “If America is ever defeated, it will be from within and not from without.”

I think that is what the great poet, Edwin Markham had in mind when he wrote these words: “I fear the vermin that shall undermine Senate and school and citadel and shrine. I fear the vermin that shall honeycomb the walls and towers of state in unsuspecting hours.”

Now we have some vermin in our midst. Some of them are spies paid by foreign countries to steal our secrets and send them home. We can seek out and hunt down the spies in our midst, and I am not worried so much about them. There are others who seek to undermine the foundations of our Republic and destroy the fundamental principles that have made us a great people and a great country in the relatively short period of 165 years. Perhaps they are well-meaning, but they are misguided. They would no longer subscribe to those principles that your forefathers and mine had in mind when they erected here on these shores this Republic dedicated to liberty and dedicated to the proposition that men shall be free and that business shall be free and that working together, man in competitive business, will produce and create here a great nation.

That has come to pass during these past 165 years. Let us dedicate ourselves—and I did not come here to sell you on the virtues of free enterprise; you already believe in them. But do you talk to your children about them? Do you tell them what made this country great and what it stands for and has stood for down through the years? And do you talk to the Boy Scout troops and to the Men’s Brotherhood at the church and to your civic clubs?

Let us all dedicate ourselves in our individual capacities, never to forget the things upon which this nation was founded and the principles and the ideals that down through the years we have respected and we have followed and that have made us a great people. Let us maintain this forever as the land of the free and the home of the brave. But remember this, it is only the free that are brave, and only the brave that are free.

Thank you! (Prolonged applause.)

TOASTMASTER BUMGARDNER: We thank you for taking the time from Washington to come here and pay this tribute of respect to those of us who today, each one, is in private enterprise and who believes just what you have said. May it continue to be, and may it be the one thing which we, continue to hold dear. That is, freedom and bravery.

We thank you for coming and giving us this wonderful message.

You have been a gracious audience tonight. You have been here for two hours, and I want to thank each and every one of you and say to you a very merry and happy dance around the way until one o'clock. And good night.

(The meeting adjourned at ten-twenty o'clock p.m.)

GENERAL SESSION

Wednesday Morning, May 20, 1953

The meeting reconvened at nine-forty o'clock, a.m., President Current presiding.

PRESIDENT CURRENT: Will the meeting please come to order?

The Chair recognizes Dr. Harrison M. Berry, Jr.

DR. BERRY, JR.: Thank you, Dr. Current. Good morning, Ladies and Gentlemen: It is certainly nice to be back with you again this morning. I have a few slides which we will not need at the moment, but I thought we could use them to advantage before we finish.

ROENTGEN INTERPRETATION OF CYSTS OF THE JAWS

In order to discuss cysts of the jaws and oral cavity in a systematic manner, we shall utilize as a "check-list" the Classification of Cysts of the Jaws from Kronfeld's "Histopathology of the Teeth and Their Surrounding Structures" as edited by Boyle.

I. Developmental cysts

A. From odontogenetic tissue

1. Periodontal cyst

- a. Radicular or dental root apex type
- b. Lateral type

- c. Residual type
- 2. Dentigerous cyst
- 3. Primordial cyst
- B. From nondental epithelial tissues
 - 1. Median cyst (median palatine cyst)
 - 2. Incisive canal cyst
 - 3. Globulomaxillary cyst
 - 4. Nasolabial cyst
 - 5. Dermoid cyst
- C. From nondental nonepithelial tissue
 - 1. Bone cyst—(Traumatic and nontraumatic, may be hemorrhagic)
- II. Cystic neoplasms (dental origin)
 - 1. Ameloblastoma (arise as solid masses, secondarily become cystic)
- III. Retention cysts (mucocoeles)
 - 1. Mucous cyst
 - 2. Ranula
 - 3. Mucous cyst of antrum

Cysts of group A are those arising from tissue of the tooth germ, i.e. the tissues which play a part in the development of the tooth. The periodontal cysts are those which arise from remnants of the tooth germ which reside in the periodontal ("around the tooth") tissue, or the tissue which connects the root of the tooth to the bone of the tooth socket. The most common of these is the Radicular or dental root apex type. This cyst generally, but not necessarily, occurs at the root ends of teeth whose pulps have been infected by decay. The pulp may die as a result of this infectious decay, but if it is not too acute, nature often is able to build a protective barrier around the root end to prevent the infection from spreading out of the tooth into the bone. This barrier is spoken of as a dental granuloma, and appears in the x-ray film as dark area at the root end, bounded by a heavy wall of bone. Epithelial cells within this granuloma may, for some unknown reason, start to multiply; the cells in the center of this multiplying mass liquefy and we end up with an epithelial-lined sac containing fluid, a true cyst, much as a balloon filled with water. As the fluid keeps accumulating, the fluid pressure causes bone destruction. As long as the pressure is maintained, the cyst will continue to expand and destroy bone, and since it is usually painless, the patient will not become aware of it unless the dentist discovers it in the x-ray film, or until it becomes so large that it causes a bulging of the jaw bone. Treatment generally consists of extraction of the tooth and surgical removal of the complete cyst lining.

The Lateral type periodontal cyst is the same type of epithelial lined sac filled with fluid, but it arises along the side of the tooth root rather than at its end. Another important difference is that it has a tendency

to arise from normal teeth which may not have even the smallest cavity. While not as common as the Radicular or root apex cyst, it is nonetheless another good reason for periodic x-ray examination by your dentist even though you think your teeth are in a healthy condition. It, too, is painless and its treatment requires removal of the complete cyst lining. The tooth itself, however, can often be retained when involved with a true lateral cyst.

The Residual type periodontal cyst is a dental root cyst which remains or forms after removal of teeth. Studies at the University of Pennsylvania on 1000 patients who had had all of their teeth removed previously showed that 10 had residual cysts, most of which were extremely large. This is but another indication of the importance of frequent routine x-ray examinations, *even though all teeth have been extracted previously*. Mere absence of teeth does not necessarily rule out trouble within the jaw bone.

The Dentigerous Cyst arises from the epithelial follicle or "capsule" of the developing tooth, and is a cyst which surrounds the crown of the tooth while it is still embedded within the bone. This cyst is, like the others, painless, and can destroy much bone and even neighboring tooth roots if undiscovered. These can occur on any unerupted tooth, but are more frequently seen on lower and upper third molars and upper canine or cuspid teeth, since these are the teeth which most frequently fail to erupt normally. Under some circumstances the tooth involved in a dentigerous cyst can be saved and brought into position after treatment of the cyst.

The Primordial Cyst is extremely rare. It arises when the cells of the tooth germ turn into a cyst before they develop a tooth. It, therefore, appears only as a cystic cavity in the bone, not in connection with a tooth, and the exact diagnosis can be made only by microscopic examination of the cyst lining after its removal.

Cysts of Group B are not associated with teeth, but arise from epithelial cells pinched off when the tissues of the developing embryo come together and fuse at "suture" lines. The median palatine cyst occurs in the middle of the hard palate or roof of the mouth where the two plates of bone which form the roof of the mouth unite. The incisive canal cyst occurs just behind the two first incisor teeth, and is the most common of this group.

The Globulomaxillary cyst occurs on either side of the midline behind the front teeth and is quite rare.

The Nasolabial cyst occurs in the skin at the junction of the corner of the nose and the upper lip. This is the same spot where the "hare lip" is formed if these two skin structures fail to fuse together normally.

The Dermoid Cyst is a rare cyst which more often forms in the ovary from displaced epithelial tissue, but has been known to occur in the floor of the mouth under the tongue.

In Group C the so-called "Bone Cyst" is not a true cyst as we have been speaking of it; i.e. it is not a fluid-filled epithelial sac, and it has no lining at all. It often occurs as the result of a blow to the jaw causing bleeding within the bone. This in turn destroys some bone and gives an x-ray picture of a dark area in the bone generally not connected with teeth.

Group II lists Cystic Neoplasms (Tumors) of dental origin. The example of this group is the Ameloblastoma. This is a tumor arising from the cells which normally produce the enamel in the developing tooth. Instead of performing their proper function they invade the surrounding bone in strands. Later on the bone between these strands may degenerate into cysts. This tumor is rather slow growing and usually painless but may produce much destruction and deformity if not removed. It does not tend to spread to other parts of the body, but can recur locally if all the cells are not removed at operation.

Group III lists Retention Cysts which are mucous glands which become blocked; they fill with mucous which cannot pour out of the gland and it therefore swells. These mucous cysts may occur anywhere throughout the oral cavity where mucous glands are found. The chief sites are the inside of the cheeks and lips. Occasionally these may be bitten during chewing, or may simply break and disappear. When they occur in the floor of the mouth under the tip of the tongue they produce a swelling which so simulates a "puffed-up" frog's belly that it was named "Ranula." Where mucous glands in the lining membrane of the maxillary sinus become blocked, they produce a characteristic x-ray picture of mucous cysts of the antrum.

PRESIDENT CURRENT: Dr. Berry, I told you yesterday that we were going to make things a little lighter as the evening went on. I can truthfully say that all of the wonderfully scientific things you have given us here would not have caused me to know you as the real man unless you had been present at that "lightening-up" party. We did enjoy having you and your lovely wife. We hope you will come back as often as you can. Thank you very much!

We are calling the last meeting of the House of Delegates.

(The General Session adjourned at ten-ten o'clock, a.m.)

GENERAL SESSION

Wednesday Morning, May 20, 1952

The meeting reconvened at eleven-thirty o'clock, a.m., President Current presiding.

PRESIDENT CURRENT: The final General Session of the Ninety-Seventh Anniversary Convention will please come to order!



Here are the new officers of the North Carolina Dental Society who were elected at the annual convention at Pinehurst. Left to right: Dr. Ralph Coffey, Morganton, secretary-treasurer; Dr. Bernard N. Walker, Charlotte, president-elect; Dr. Neal Sheffield, Greensboro, the new president; Dr. A. C. Current, Gastonia, retiring president, who is presenting the gavel, and Dr. Wade H. Breeland, Belmont, vice-president.

The Chair will ask Dr. Charlie Poindexter and Dr. Charles Teague to kindly present the new President for installation.

(Dr. Poindexter and Dr. Teague escorted Dr. Neal Sheffield to the platform.)

PRESIDENT CURRENT: Neal, the time has come for the retiring President to place in your hands the gavel of authority as the new President of the finest dental organization in the world, the North Carolina Dental Society.

As I pass this gavel of authority to you, I do it with a heart filled with love and gratitude. I do it with a firm conviction that this outgoing administration has made many contributions to a progressive and successful and harmonious and loving state society in which we can work in the future. I do it in complete confidence that you share the fact that we have an opportunity for kind, gentle, loving, fellowship, for forward movement in this Society in the years that lie ahead. I do it with the knowledge that you are an able leader.

Neal, I bid you, with all my love, Godspeed.

PRESIDENT NEAL SHEFFIELD: There is a Chinese proverb that says that wherever an uncle kisses his nephew for the first time, there shall he gain special attainment.

For instance, should the kiss of his uncle be on the forehead, the man will be a great thinker. If it should be on the throat, he will be a great singer. Now, we have no way of knowing where Eddy Current's uncle kissed him for the first time, but the thing that we do know, Eddy, is that you have given the North Carolina Dental Society one of the finest administrations that it has had in many years. Your fine example of leadership and your devotion to your profession is an inspiration to all of us.

I accept this gravel with all of its authority and obligations. I accept it with a feeling of gratitude to the grandest organization in the world and at the same time I am fully aware of my shortcomings. It will be my aim to carry on with the best of my ability. With the cooperation of this society, I pledge my best effort.

Please allow me "Eddy" in the name of the North Carolina Dental Society, to congratulate and thank you for a stupendous job well done. (Prolonged applause.)

There is a person in the room that I would like to take just a few seconds and introduce to this audience. She is my wife, the person who has done more for me than any other person in the world. Behind the scene she has probably done as much work for the North Carolina Dental Society as I have.

Louise will you please stand and let the people see you.

(The audience applauded Mrs. Louise Sheffield.)

PRESIDENT SHEFFIELD: The next order of business is the installation of our President-Elect. Since he is on the rostrum, we shall not ask anybody to escort him. I will just ask Bernard Walker to come over here, please.

Bernard, this procedure is not new to you, for three years you have been inducted to office as Secretary-Treasurer and each year you have pledged your best and each year you have given just that to our organization.

Your fine work as Secretary has contributed much to the success of our meetings and the smooth running of our society.

It is a rare privilege that the North Carolina Dental Society has as its President-Elect a man with the experience and ability that you possess. During the years of your service to the North Carolina Dental Society you have endeared yourself in the hearts of every member.

Bernard, it gives me extreme pleasure to induct you as President-Elect of the North Carolina Dental Society.

DR. BERNARD WALKER: Thank you, Mr. President.

Members of the North Carolina Dental Society and Guests (that includes my good wife and my daughter): It has been a privilege and a pleasure to have served three years as your Secretary. I have enjoyed every minute of it. I feel humble and I just hope and pray that I can fulfill the expectations of my friends in this office of President-Elect in the years to come.

I should like to thank all of the district, secretaries who have worked with me in the past three years, the Presidents of the districts, and the Presidents whom I have served under. I want to tell each of you that it has been a privilege, that it has never been a task. It will be a pleasure, again, this fall, to visit all of your districts and enjoy your hospitality and your excellent programs.

Again, I pledge to you that I will do all in my power to continue to serve each of you in our great Society. Thank you!

PRESIDENT SHEFFIELD: The next item on the program is the induction of our Vice-President. I will ask Dr. Amos Bumgardner and Dr. Claude Parks to escort Dr. Breeland to the rostrum.

(Dr. Bumgardner and Dr. Parks escorted Dr. W. H. Breeland to the platform.)

PRESIDENT SHEFFIELD: The North Carolina Dental Society was very wise in choosing a man of your ability and fine qualities as its Vice-President. I want to assure you that we will give you plenty of work during the coming year.

Wade, I am very happy to declare you installed as Vice-President of the North Carolina Dental Society.

DR. W. H. BREELAND: Mr. President, Members of the North Carolina Dental Society: In being installed in this office, I fully realize the responsibilities, the requirements, and the amount of travel that is required of this office.

I assure you that it will be a pleasure to work with the fine officers of this Society and its leaders this coming year. I shall put forward every effort to meet the requirements of this office this coming year.

I thank you!

PRESIDENT SHEFFIELD: The next order of business is the installation of our new Secretary-Treasurer, Dr. Ralph Coffey. I will ask Dr. Moultrie Truluck and Dr. Clinton Diercks to escort the Secretary-Treasurer to the rostrum.

(Dr. Truluck and Dr. Diercks escorted Dr. Ralph Coffey to the platform.)

PRESIDENT SHEFFIELD: It is not necessary for me to enumerate and dwell upon the great responsibilities that your office carries. We all know that the office of Secretary-Treasurer is one of the most important posts in the official family. We know that you will assume the duties and obligations of this high office and will execute them in your usual masterful way. I shall look forward to working with you the coming year.

I now declare you officially installed as Secretary-Treasurer of the North Carolina Dental Society.

DR. RALPH COFFEY: President Sheffield, Members of the North Carolina Dental Society: To tell you that I am nervous here is unnecessary, because you know it. I recognize this fact when I think of the great leaders of the past and that I am asked to carry on for them. I hope I can conduct this office in keeping with the high standards of the North Carolina Dental Society.

My profession has afforded me great pleasure, and also my family. Anything that I might do for it is just part payment of what it has given me. I shall conduct the office with that dignity which shall be in keeping with the North Carolina Dental Society, with the help of my sweetheart for the past twenty-two years. I shall conclude my speech now and start my work.

Thank you!

PRESIDENT SHEFFIELD: The next item on the agenda will be the induction of the members of the State Board of Dental Examiners. They are Dr. Sandy Jennette and Dr. Erbie Medlin.

Will Dr. John Pharr and Dr. Paul Jones escort these gentlemen to the rostrum, please?

(Dr. Pharr and Dr. Jones escorted Dr. Jennette and Dr. Medlin to the platform.)

PRESIDENT SHEFFIELD: This is a unique situation in that both of you men were re-elected to the Board of Dental Examiners and don't forget for one moment that the North Carolina Dental Society would have re-elected you to this very important office if you had not made good. It is men that are fair, men who are honest and men of experience that we need to guard the portals of our profession.

I deem it an honor to declare Erbie Medlin and Sandy Jennette officially installed as members of the Board of Dental Examiners.

We shall hear from Dr. Sandy Jennette first.

DR. JENNETTE: Thank you! That is all you want to hear.

PRESIDENT SHEFFIELD: Erbie, do you have a word?

DR. MEDLIN: Thank you! That is all.

PRESIDENT SHEFFIELD: The next item on the program will be the installation of our delegate to the American Dental Association. That is Dr. C. C. Poindexter.

I will ask Dr. Fred Hunt and Dr. Paul Fitzgerald, Sr. to escort Dr. Poindexter to the rostrum.

(Dr. Hunt and Dr. Fitzgerald escorted Dr. C. C. Poindexter to the platform.)

PRESIDENT SHEFFIELD: Charlie, few men in our Society are as well-prepared and know the workings of organized dentistry as you do. You are a worker in your county society, and your district and state societies. You know what is going on. It is men of your caliber whom we need to represent us on the national level. We know that you will represent us well.

I am now very happy to declare you installed as a delegate to the American Dental Association.

DR. C. C. POINDEXTER: All I can say is thank you.

PRESIDENT SHEFFIELD: The next item is the installation of five alternate delegates to the American Dental Association. They are: Paul Fitzgerald, Sr., Fred Hunt, A. C. Current, Sam Towler, and Frank Kirk.

Will those who are present come forward, please?

Gentlemen: I am glad to greet you as alternate delegates to the American Dental Association. You have a definite duty to perform, and I know that if the occasion arises and if you are needed, you will all be on the job.

I now wish to declare you installed as alternate delegates to the American Dental Association.

Gentlemen, we have come to the reading of committees of the North Carolina Dental Society. I have my lists which are complete. I know that the hour is late, and that we are all tired. I do not mind reading them if it is your desire. What are your wishes in the matter?

DR. PAUL FITZGERALD, SR.: Mr. President, it is the customary procedure to read the entire list. However, I would suggest that because of the time, you read the heads or chairmen of your important committees only.

PRESIDENT SHEFFIELD: Thank you, Dr. Fitzgerald.

On that recommendation, I will read only the Executive Committee:

Chairman, C. C. Poindexter.

Paul Fitzgerald.

I. R. Self.

By referring to your Program you will note that there is a new feature added this time. That was to be, as I understood it, an outline of the activities the new President would inaugurate during his administration. I know this is a new feature. I think it is a good one. It is, at least, good for the President, because he is going to have to start thinking about his administration immediately. I think it will stimulate thought.

I have an outline of the things I would recommend and propose for the coming administration. The time is late. There is a mere handful here. I wish I could have read that the other night when we had a full house.

What is the wish of this group? Shall I read this at the present time or shall I publish it in the JOURNAL of the North Carolina State Dental Society? I should like to hear an expression from somebody. Marvin Evans, when does the first JOURNAL come out in the fall?

DR. MARVIN EVANS: President Neal, it will come out some time in August, or the first of September.

PRESIDENT SHEFFIELD: If this is read here, it will be read before only a very small group, and it will take fifteen minutes at least. The earliest time I can get that to the membership is through the JOURNAL of the North Carolina Dental Society, which Dr. Evans says will be out some time in August or the first of September. Shall that include my message to you, at that date? I should like to hear an expression.

DR. GRADY ROSS: I move it be printed in the JOURNAL of the North Carolina Dental Society. (The motion was duly seconded and carried.)

PRESIDENT SHEFFIELD: It has been voted that this message of the President, outlining his objectives for the coming year, be not read because of the small number here and the late hour.

The motion further states that it be run in the September issue of the JOURNAL of the North Carolina Dental Society.

DR. PAUL JONES: Might I suggest that you inform the press of the contents, largely, and let them give us an outline through the press. Then we will all get it pretty quickly.

PRESIDENT SHEFFIELD: Dr. Jones, I appreciate the suggestion.

Is there anything else to come before the Ninety-seventh Anniversary Meeting of the North Carolina Dental Society before we adjourn?

DR. PAUL FITZGERALD, SR.: Mr. President, may I ask before you adjourn, that you announce the Executive Committee will meet immediately after adjournment.

PRESIDENT SHEFFIELD: Gentlemen, you have heard the request of Dr. Fitzgerald, and I hope that we will have a full attendance at the Executive Committee Meeting.

Is there anything else that might come before this body before we adjourn?

(No response.)

PRESIDENT SHEFFIELD: I now declare the meeting of the ninety-seventh session of the North Carolina Dental Society duly adjourned.

(The Convention adjourned at twelve o'clock noon.)

NORTH CAROLINA DENTAL SOCIETY

STANDING COMMITTEES

EXECUTIVE COMMITTEE

C. C. Poindexter, *Chairman* (1956)

Paul Fitzgerald, Sr. (1954)

I. R. Self (1955)

ETHICS COMMITTEE

John A. McClung, *Chairman* (1955)

A. W. Bottoms (1954)

Royster Chamblee (1957)

Clyde Minges (1956)

Paul Fitzgerald, Jr. (1958)

LEGISLATIVE COMMITTEE

P. B. Whittington (1954)

Paul Jones (1956)

Royster Chamblee (1955)

Z. L. Edwards (1957)

John Pharr (1958)

PROGRAM COMMITTEE

C. H. Teague, *Chairman*

Ralph Coffey, *Co-ordinator*

C. M. Parks

Walter Clark

Howard Branch

Coyte Minges

Frank Kirk

CLINIC COMMITTEE

L. F. Bumgardner, *Chairman*

James Hinson

E. L. Eatman

Milo Hoffman

A. A. Lacky

H. E. Plaster

MEMBERSHIP COMMITTEE

Bernard Walker, *Chairman*

Clinton Diercks

Harold Thompson

Maurice Newton

W. A. Finch

M. M. Lilley

EXHIBITS COMMITTEE

Carey Wells, *Chairman*

J. M. Kilpatrick

Glenn Lazenby, Jr.

R. W. Brannock

C. E. Abernethy

J. W. Menius, Jr.

NECROLOGY COMMITTEE

W. L. McRae, *Chairman* (1955)

J. S. Betts, *Honorary Chairman*

S. R. Horton (1954)

Ralph Coffey (1957)

F. E. Gilliam (1956)

J. P. Reece (1958)

LIBRARY AND HISTORY COMMITTEE

John L. Ashby, *Chairman* (1954)

J. Z. Moreland (1955)

Paul Fitzgerald, Jr. (1957)

B. McK. Johnson (1956)

M. R. Hunter (1958)

INSURANCE COMMITTEE

J. R. Edwards, *Chairman* (1958)

M. M. Lilley (1957)

P. P. Yates (1955)

Herman Houck (1954)

C. H. Teague (1956)

PUBLICITY COMMITTEE

E. D. Baker, *Chairman* (1957)

C. D. Kistler (1954)

Howard Allen (1956)

Walter Clark (1955)

C. P. Godwin (1958)

CONSTITUTION AND BY-LAWS COMMITTEE

F. O. Alford, *Chairman* (1955)

Dan T. Carr (1954)

Cleon Sanders (1957)

Z. L. Edwards (1956)

A. P. Cline (1958)

PROSTHETIC DENTAL SERVICE COMMITTEE

C. C. Poindexter, *Chairman* (1957)

J. T. Lasley (1954)

F. O. Alford (1956)

Coyte Minges (1955)

Walter McRae (1958)

COUNCIL ON DENTAL HEALTH

E. A. Branch, *Chairman* (1958)

C. S. Caldwell (1954)

R. L. Whitehurst (1956)

E. W. Connell (1955)

Sam Bobbitt (1957)

STATE INSTITUTIONS COMMITTEE

O. L. Presnell, *Chairman* (1955)

Z. V. Kendrick (1954)

J. G. Poole (1957)

W. M. Matheson (1956)

C. W. Poindexter (1958)

RELIEF COMMITTEE

Paul Fitzgerald, Sr., *Chairman* (1957)

J. C. Watkins (1954)

S. H. Steelman (1956)

Wilbert Jackson (1955)

J. T. Lasley (1958)

ADVISORY COMMITTEE FOR VETERANS ADMINISTRATION PROGRAM

P. B. Whittington, Jr., *Chairman* (1958)

Wilbert Jackson (1954)

Walter Clark (1956)

C. A. Graham, Sr. (1955)

Riley Spoon (1957)

SPECIAL COMMITTEES

ADVISORY COMMITTEE NORTH CAROLINA MEDICAL CARE &
GOOD HEALTH ASSOCIATIONS. H. Isenhour, *Chairman*

Z. L. Edwards, Jr.

Marcus R. Smith

W. L. Saunders

E. R. Motley

I. R. Self, Jr.

RESOLUTIONS COMMITTEE

D. L. Pridgen, *Chairman*

S. E. Moser	C. M. Parks
Dick Erwin	Clyde Minges
Claude Adams	G. E. Waynick

DENTAL COLLEGE COMMITTEE TO THE UNIVERSITY OF NORTH CAROLINA

*First District**Second District**Third District*

Walter Clark (1954)	F. O. Alford (1954)	Claude Adams (1954)
Fred Self (1955)	John Pharr (1955)	L. G. Coble (1955)
C. A. Pless (1956)	Wade Sowers (1956)	S. W. Shaffer (1956)

*Fourth District**Fifth District*

Wilbert Jackson (1954)	Clyde Minges (1954)
L. M. Massey (1955)	Paul Jones (1955)
D. L. Pridgen (1956)	Paul Fitzgerald, Sr. (1956)

CLINIC BOARD OF CENSORS

G. R. Willis, *Chairman*

David Abernethy	J. P. Bingham, Jr.
H. A. Karesh	V. E. Bell

W. T. Ralph

PUBLICATION COMMITTEE

Marvin Evans, *Chairman*

A. T. Lockwood	H. P. Reeves
W. T. Burns	Worth Byrd

Frank Harris

ENTERTAINMENT OF OUT-OF-STATE VISITORS COMMITTEES

J. W. Branham, *Chairman*

Hugh Hunsucker	O. R. Hodgins	Junius Smith
Clyde Minges	R. H. Holden	M. H. Truluck
Olin Owen	Ralph Jarrett	O. C. Barker

SUPERINTENDENT OF CLINIC COMMITTEE

A. T. Jennette, *Chairman*

Carl Wolfe	L. E. Wall
R. M. Olive, Jr.	L. G. Page

W. B. Sherrod

ADVISORY COMMITTEE TO DENTAL HYGIENIST ASSOCIATION

Amos S. Bumgardner, *Chairman*

S. P. Gay	Cary T. Wells
Wade Sowers	R. M. Olive, Sr.
W. W. Bowling	F. Spencer Woody

ARRANGEMENTS COMMITTEE

H. Royster Chamblee, *Chairman*

J. J. Lauten	Henry Murry
J. R. Wheless	A. R. Stanford
W. K. Griffin	J. E. Roberts

ENTERTAINMENT COMMITTEE

Grady Ross, *Chairman*

George Alexander
W. J. Turbyfill
H. C. Carr

H. M. Patterson
Wade Breeland
C. I. Miller

GOLF COMMITTEE

Norman Ross, *Chairman*

W. D. Yelton
Everett Teague
Worth Byrd

P. B. Whittington, Jr.
J. W. Sigmon
J. M. Pringle

PUBLIC RELATIONS AND FLUORIDATION COMMITTEE

John C. Brauer, *Chairman**First District*

Chairman: C. A. Pless

Second District

Chairman: O. R. Hodgins

Third District

Chairman: F. E. Gilliam

Fourth District

Chairman: Royster Chamblee

Fifth District

Chairman: Z. L. Edwards

EXTENSION COURSE COMMITTEE

C. M. Parks, *Chairman*

Sam Hart
J. P. Bingham
J. H. Hughes

W. W. Rankin
L. G. Coble
D. S. Cook

ADVISORY COMMITTEE TO THE AMERICAN ACADEMY OF PEDIATRICS

W. W. Demerritt, *Chairman*

J. D. Southworth
W. M. Sloop
M. L. Cherry

C. W. Poindexter
A. A. McDuffie
A. W. Craver

W. A. Pressly

COMMITTEE ON GENERAL ANESTHESIA

Marvin E. Chapin, *Chairman*

T. E. Sikes, Jr.
Tom Blair

K. L. Johnson
J. C. Finn

W. P. Hinson
Hilton Crotts

MILITARY AFFAIRS COMMITTEE

C. D. Eatman, *Chairman*

W. P. Weeks
Ralph Falls
J. T. Bell

A. C. Early
J. T. Thomas
W. T. Burns

ADVISORY COMMITTEE TO THE SELECTIVE SERVICE

Sam Bobbitt, *Chairman**First District*

Walter Clark
A. D. Abernathy, Jr.

Second District

Grady Ross
T. L. Blair

Third District

Norman Ross
C. C. Poindexter

Fourth District
 Wilbert Jackson
 Tom Collins

Fifth District
 Dan Wright
 Guy Pigford

COMMITTEE ON EDUCATION FOR DENTAL ASSISTANTS

John Pharr, *Chairman*
 John C. Brauer, *Co-ordinator*

First District
 Chairman: C. A. Pless
Second District
 Chairman: Burke Fox

Third District
 Chairman: S. P. Gay
Fourth District
 Chairman: J. W. Branham

Fifth District
 Chairman: Clyde Minges

ADVISORY COMMITTEE TO THE SCHOOL HEALTH CO-ORDINATING SERVICE

Z. L. Edwards, *Chairman*

S. E. Moser
 J. T. Lasley

Don Kiser
 Sam Bobbitt

COMMITTEE TO AMERICAN LEGION

C. M. Parks, *Chairman*

Ralph L. Falls
 P. B. Whittington, Jr.

E. D. Baker
 Coyte Minges

INDUSTRIAL COMMISSION COMMITTEE

S. B. Towler, *Chairman*

R. F. Hunt
 T. L. Blair

C. C. Poindexter
 Ralph Coffey

CENTENNIAL COMMITTEE

F. O. Alford, *Chairman*

J. S. Betts, *Honorary Chairman*

Wade Breeland, *Co-ordinator*

First District
 A. C. Current, Sr.
 C. T. Wells

Second District
 Homer Guion
 W. B. Sherrod

Third District
 C. C. Poindexter
 H. V. Murray

Fourth District
 J. M. Fleming
 C. W. Sanders

Fifth District
 Clyde Minges
 Paul Fitzgerald, Sr.

LIAISON COMMITTEE TO THE OLD NORTH STATE DENTAL SOCIETY

Frank Kirk, *Chairman*

C. G. Powell
 Ralph Wilkins

O. B. Kirby
 W. I. Farrell

Gates McKaughan

HOSPITAL DENTAL SERVICE COMMITTEE

G. L. Hooper, *Chairman*

K. I. Andreve
 Dan Carr

G. S. Abernethy
 J. L. Henson

E. W. Lipe

MEDICAL-DENTAL RELATIONSHIP COMMITTEE

Walter T. McFall, *Chairman*

Emery Bencini

F. G. Atwater

Hubert Plaster

A. W. Cash

A. L. Wooten

H. E. Butler

DENTAL CARIES COMMITTEE

Grover Hunter, *Chairman*

J. Ross Pringle

Dan Wright

A. C. Current, Jr.

Zeno Edwards, Jr.

Forest Port

L. H. Butler

W. P. McClelland

G. L. Overman

REPORT OF THE EXECUTIVE COMMITTEE
NORTH CAROLINA DENTAL SOCIETY
O. HENRY HOTEL, GREENSBORO, N. C.
JULY 15, 1952

The Executive Committee met at 2:30 P.M., following the morning meeting of the Executive and the Program Committees and chairmen of the following committees: Clinic, Relief, Exhibits, Publicity, Prosthetics, Entertainment of Out-of-State Visitors, Advisory Committee to Dental Hygienists, Arrangements, Entertainment, Housing, Advisory Committee to Selective Service, Committee on Education for Dental Assistants, Public Relations and Fluoridation, Advisory Committee for Veterans Administration, Legislative, and Dr. Paul Jones, President of the Dental Foundation and Marvin Evans, Editor, who met for the purpose of setting up plans for the 1953 convention, which will be held at Pinehurst, N. C. on May 17, 18, 19, and 20.

Members present were: J. Homer Guion
Paul Fitzgerald
I. R. Self, Sr.
A. C. Current, President
Neal Sheffield, President-Elect
Bernard N. Walker, Secretary-Treasurer

Others present: Marvin Evans, Editor-Publisher
Paul Fitzgerald, Jr.
Thomas Blair
C. C. Poindexter
Frank Gilliam
S. Everett Moser
Coyte Minges

Minutes of the last meeting were read by the secretary, and there being no objections or corrections, the minutes were approved as read.

Dr. Blair, Chairman of the Entertainment of Out-of-State Visitors Committee, asked for an appropriation for his committee. Dr. Paul Fitzgerald, Sr. moved that the sum of \$150.00 be appropriated, which motion was seconded by Dr. I. R. Self, Sr. and passed.

Dr. C. C. Poindexter, Chairman of the Prosthetic Dental Service Committee, reported on the work of his committee and asked that it be reimbursed for the stamps that were used in mailing out correspondence to the members of the NCDS. Dr. Fitzgerald moved that \$27.00 be paid, which motion was seconded by Dr. Sheffield and passed.

Dr. Evans, Editor-Publisher, reported on the Journal. He asked for instructions on the matter of giving the Dental Auxiliary free space in the Journal. The matter was discussed by Drs. Current, Evans, and Fitz-

gerald, Sr. Dr. Current moved that the Executive Committee authorize the Editor to have the Auxiliary submit their program to him in time to have it published in our Journal, which motion was seconded by Dr. Fitzgerald and passed.

Dr. Current made a motion that the Executive Committee authenticate the continuation of the Fluoridation Program and the Ladies Auxiliary working with the Development Committee of the Dental Foundation in the attempt to expand the Foundation. He moved that this be a joint special objective of the NCDS for the year. Dr. I. R. Self, Sr. seconded the motion, which was passed.

Dr. Walker made a motion that Dr. Evans communicate with Miss Keville or some steno-typist and arrange for coverage of the next convention. Dr. Current seconded the motion, which was passed.

Dr. Current discussed the Public Relations and Fluoridation Committee and the need for its continued good work under the leadership of Dr. Brauer. Dr. Walker made a motion that this committee be given an appropriation not to exceed \$200.00 to be used as the committee deemed necessary to carry out their program. Dr. Neal Sheffield seconded the motion, which was passed.

Dr. Current brought up a questionnaire received from the American Dental Association regarding the final date on which the official count of the membership of the organization should be made to determine the number of delegates that the state will have at the annual ADA convention. Dr. Fitzgerald moved that the date be the end of the past fiscal year, which motion was seconded by Dr. Current, and passed.

Dr. Current brought up for discussion the question from the ADA to the Hospital Dental Service Committee. Dr. Fitzgerald made a motion that Dr. Current be authorized to handle this matter as he thought best. Dr. Sheffield seconded the motion, which was passed.

Dr. Fitzgerald as Chairman of the Dental Relief Committee reported that a check in the amount of \$223.24 was received from the Carolina Dental Supply, resulting from the sale of the dental scraps collected at the convention, and asked that the secretary be instructed to thank the Carolina Dental Supply Company for its help and cooperation. The secretary was so instructed by Dr. Guion, Chairman of the Executive Committee.

Dr. Walker made a motion that the Chairman of the Dental Relief Committee countersign all applications for dental relief, which motion was seconded by Dr. Current and passed.

Dr. Fitzgerald discussed the dental relief fund, the members who are on relief, and the prospect of others being in need of help. He moved that the Executive Committee donate another \$500.00 for the dental relief fund, making a total of \$1,000 for 1952. The matter was discussed by Drs. Walker, Current, and Moser and the motion was seconded by Dr. I. R. Self, Sr. and passed. Dr. Walker, the secretary, asked the members of the

Executive Committee to agree that this sum would not be drawn from the bank account until the Chairman of the Dental Relief Committee notified the secretary to deposit this sum to the account of the dental relief fund.

Dr. Walker read a letter concerning a former member who claimed to be a life member. He also read a letter from the ADA stating that this man was not a life member and that he had not paid dues since 1945. Dr. Walker, as secretary, was instructed to consider anyone in this circumstance not a member until presented with proof to the contrary.

There being no further business, the meeting was adjourned.

Bernard N. Walker

Secretary-Treasurer

SIR WALTER HOTEL, RALEIGH, N. C.

Sunday, August 10, 1952

The Executive Committee was called to order following a joint meeting of the Executive Committee and the Legislative Committee.

Those present were: Homer Guion, Chairman
Paul Fitzgerald, Sr.
A. C. Current, President
Bernard N. Walker, Secretary-Treasurer

Others present were: Z. L. Edwards, Chairman of the Legislative
Committee
Frank Alford, Secretary, North Carolina State
Board of Dental Examiners
Ernest Branch
A. T. Jennete, member, North Carolina State
Board of Dental Examiners
Paul Jones
Cleon W. Sanders
Darden Eure
P. B. Whittington, Jr.
Clyde Minges
Royster Chamblee
G. L. Hooper
John Brauer
Marvin Evans

Dr. Hooper made a report on the need for dentists in the state hospitals and mental institutions, stating that steps should be studied to provide some help.

A general discussion was held by all present on the need to make certain changes in the laws governing the practice of dentistry in North Carolina. After reviewing the proposed amendments and changes, it was

decided that legal help should be employed to help the Legislative Committee draw up the changes. Dr. Current made a motion that in compliance with the expressed wish of Dr. Z. L. Edwards, Sr. and his Legislative Committee that the Executive Committee authorize the employment of legal counsel to assist the Legislative Committee in drawing up the changes and that the attorney to be so employed be left to the discretion of the Legislative Committee. The motion was seconded by Dr. Walker and passed.

There being no other business, the meeting was adjourned.

Bernard N. Walker
Secretary-Treasurer

SIR WALTER HOTEL, RALEIGH, N. C.

Monday, October 6, 1952

Following the banquet of the Fourth District Dental Society, the Executive Committee and the Ethics Committee held a joint meeting.

Those present were: Homer Guion, Chairman
A. C. Current, President
Neal Sheffield, President-Elect
Paul Fitzgerald, Sr.
Bernard N. Walker, Secretary-Treasurer

Others present were: Royster Chamblee, Chairman, Ethics Committee
Paul Fitzgerald, Jr.

Dr. Current discussed the memorial plaque in honor of Dr. H. O. Lineberger, which is to be placed in the University of North Carolina School of Dentistry. He urged the members to support this project and asked that it be noted officially in the minutes of the Executive Committee meeting. Dr. Fitzgerald, Sr. made a motion that it be approved officially by the Executive Committee. Dr. Neal Sheffield seconded the motion, which was voted on and passed.

Dr. Current discussed the problem of the inability of The Carolina Hotel to serve luncheons for the Fraternities during the annual convention. Dr. Walker requested that the secretary be instructed officially to write letters to the dental Fraternities explaining the position of the Executive Committee in this matter. Dr. Sheffield seconded the motion, which was passed.

Dr. Walker read a letter from the president of the North Carolina Dental Assistants Association requesting approval of their meeting to be held at Mid-Pines during the time of the State dental meeting. Dr. Paul Fitzgerald made a motion that the secretary be instructed to write Mrs. Alice Reece, president of the NCDAA that there is no objection to their meeting and wishing them a successful one. Dr. Current seconded the motion, which was passed.

Dr. Current read a letter from Dr. W. T. Burns, President of the Orange-Durham County Dental Society requesting Dr. Current as President of the North Carolina Dental Society to call a special meeting of the governing bodies of the North Carolina Dental Society for the purpose of presenting a grievance. After discussing the matter and reading Article 1, Sec. 1 of the Constitution and By-Laws of the North Carolina Dental Society, Dr. Walker made a motion that Dr. Current call a meeting of the governing bodies of the Society upon written request signed by a majority of the officers and Executive Committeemen of a Component Society. The motion was seconded by Dr. Sheffield and passed, and the secretary was instructed to acknowledge Dr. Burn's letter, informing him of the action of the Executive Committee.

Dr. Current discussed the School Health Fund for Indigent Children and informed the Executive Committee that the fee had been raised from \$7.50 to \$10.00 per hour. He requested that he as the dental representative on the State Board of Health be instructed to report at the next meeting of the Board that the Dental Society would continue to cooperate in this program. Dr. Fitzgerald, Sr. made the motion, which was seconded by Dr. Walker and passed.

There being no further business, the meeting was adjourned until the regular January meeting for making final arrangements for the annual convention.

Bernard N. Walker

Secretary-Treasurer

SIR WALTER HOTEL, RALEIGH, N. C.

SUNDAY, JANUARY 4, 1953

Following the joint meeting of the Executive, Legislative, and Ethics Committees, Dr. Homer Guion called a special meeting of the members of the Executive Committee and those of the Ethics Committee present to act on the request of the Legislative Committee.

Members present: Homer Guion, Chairman
Paul Fitzgerald
A. C. Current, President
Neal Sheffield, President-Elect
Bernard Walker, Secretary-Treasurer

Others present: Clyde Minges, Ethics Committee
Royster Chamblce, Ethics Committee

The Legislative Committee submitted the draft of the bill, to be entitled "An Act to Amend the Laws Relating to the Practice of Dentistry in North Carolina," to the Executive and the Ethics Committees with the request that those committees give the President, Dr. A. C. Current, the power to

call a special meeting of the House of Delegates of the North Carolina Dental Society on January 11, 1953, to receive the draft and to act on it.

Dr. Neal Sheffield made a motion that this be done, which was seconded by Dr. Fitzgerald. The Executive and the Ethics Committees voted unanimously for the called meeting.

There being no further business, the meeting was adjourned.

Bernard N. Walker

Secretary-Treasurer

MINUTES OF JOINT MEETING OF THE EXECUTIVE COMMITTEE
OF THE NORTH CAROLINA DENTAL SOCIETY AND
COMMITTEE CHAIRMEN

CAROLINA HOTEL, PINEHURST, N. C.

SUNDAY, JANUARY 11, 1953

Dr. A. C. Current, President of the North Carolina Dental Society, called the meeting to order and Dr. Amos Bumgardner gave the invocation.

Members present were: A. C. Current, President

Bernard Walker, Secretary-Treasurer

Marvin Evans, Editor-Publisher

Paul Fitzgerald, Sr.

I. R. Self, Sr.

Homer Guion, Executive Committee

S. Everett Moser, Program Committee

Grady Ross, Entertainment Committee

Darden Eure, Publicity Committee

David Abernethy, Arrangements Committee

John Brauer, Public Relations & Fluoridation
Committee

John Pharr, Dental Assistants

L. F. Bumgardner, Clinic Committee

Thomas Blair, Out-of-State Visitors Enter-
tainment Committee

Amos Bumgardner, Advisory Committee to
Dental Hygienists

W. Breeland, Golf Committee

Howard Branch, Housing Committee

Coyte Minges

S. C. Duncan

Allen Cash

John McClung

Z. L. Edwards, Sr.

Edgar Sikes, Sr.
Norman Ross
Burke Fox
Sam Towler
Mrs. Nancy Sutton Leskosky
Miss Lucy Williams
Miss Edna Zedaker
Miss Lillian Calicutt
Mrs. Alice Reece

Dr. Homer Guion, Chairman of the Executive Committee, was asked whether there was any report from his committee. He stated there was no report at this time. Secretary Walker, no report.

Dr. S. E. Moser reported that the program for the 1953 meeting was complete and that he believed it to be very interesting, well-rounded, and educational. He stated that the meeting would begin with the general session at 8:30 o'clock Sunday evening, May 17, 1953.

Dr. L. F. Bumgardner, Chairman of the Clinic Committee, reported that his committee was encouraging the idea that fewer clinics of a higher quality be given. There probably would be around 18 clinics instead of 30 odd, and that in this way the confusion in the hall would be lessened. He reported also that this year they hoped to have some scientific exhibits embracing topics of interest.

Dr. Carey Wells, Chairman of the Exhibits Committee, was sick but he sent a report, which was read by the secretary. The exhibit space was being sold at a very satisfactory rate and he expected to have a large number of exhibitors. He requested that someone check about the possibilities of motion pictures for commercial exhibit. This matter was referred to the Executive Committee for action.

Dr. Darden Eure, Chairman of the Publicity Committee, reported that the publicity of the meeting would be handled by Mr. R. W. Madry.

Dr. Marvin Evans, Editor-Publisher of the Journal of the North Carolina Dental Society, reported that the Journal would be out this week.

Dr. Thomas Blair, Chairman of Out-of-State Visitors Entertainment, reported that his committee would be ready to meet the clinicians and guests and take care of them.

Dr. Amos Bumgardner, Chairman of the Advisory Committee to the Dental Hygienists' Association, reported on his committee's work with the hygienists. He complimented their Association on its efforts and growth. He reported also that they would meet with the North Carolina Dental Society on Sunday night in joint session and that on Monday they would have their own program. He introduced Mrs. Nancy Sutton Leskosky, vice-president of the Hygienists' Association, and Miss Williams, Program Chairman, who gave an outline of their program.

Dr. S. C. Moser, Chairman of the Program Committee, complimented the Hygienists' on their fine program and ingenuity for arrangements.

Dr. David Abernethy, Chairman of the Arrangements Committee, reported that his committee was ready to do everything possible in regards to arrangements.

Dr. Grady Ross, Chairman of the Entertainment Committee, reported on the plans for the banquet and dance following the banquet. The speaker for the banquet had not been chosen. They hope to have an excellent orchestra for the dance.

Dr. W. Breeland, Chairman of the Golf Committee, reported that instead of having a golf dinner the prizes would be placed in a conspicuous place with the names of the winners, so that everyone could see them.

Dr. Howard Branch, Chairman of the Housing Committee, announced that the applications for reservations would be mailed out soon and asked that the secretary of the society send out postal cards notifying the members in advance, so that they could be on the lookout for the applications. Dr. A. C. Current instructed the secretary to get out the cards.

Dr. John Brauer, Chairman of the Public Relations and Fluoridation Committee, reported on the plans for the National Children's Dental Health Day to be held in February. He announced that the fluoridation program was making progress and that 30 odd cities and communities were either fluoridating the communal water supply or in the process of doing it.

Dr. John Pharr, Chairman of Committee on Education for Dental Assistants, reported that his committee, with Dr. John Brauer as co - ordinator, had just finished a meeting and that Dr. Brauer would make the report. Dr. Brauer reported that the objective of this committee is to have an extension course designed through the Extension Division of the University and to make such available to all who are at present dental assistants and also to those young ladies who might wish to become dental assistants. The American Dental Assistants Association recommended a course of about 104 clock hours. The Committee on Dental Assistants Education of the North Carolina Dental Society is developing an extension course which will have a minimum of 104 hours and beyond that. The Extension Division of the University looks with favor upon the development of this course. Throughout the country there are at present only three or four institutions that offer formal training for dental assistants, while there are at present some 83,000 practicing dentists and only 55,000 dental assistants.

Dr. Burke Fox made the suggestion that the Clinic Committee invite the Dental Assistants Association to present a few table clinics.

Miss Zedaker reported that the dental assistants would open their meeting on Sunday afternoon and close Tuesday afternoon, May 19; that headquarters were still in doubt but that arrangements were being made with the Holly Inn and that an announcement would be made soon.

Only those directly connected with arrangements for the coming convention were invited to this joint meeting, and Dr. Current thanked all for their attendance.

Bernard N. Walker
Secretary-Treasurer

MINUTES OF THE MEETING OF THE EXECUTIVE COMMITTEE
NORTH CAROLINA DENTAL SOCIETY

CAROLINA HOTEL, PINEHURST, N. C

JANUARY 11, 1953

Dr. J. Homer Guion, Chairman of the Executive Committee, called a meeting of the Executive Committee following the joint meeting of the Executive Committee and chairmen of committees concerned with planning the 1953 annual convention.

Members present were: J. Homer Guion, Chairman
Paul Fitzgerald
I. R. Self, Sr.
A. C. Current, President
Bernard Walker, Secretary-Treasurer

Others present were: Grady Ross, Chairman of Entertainment Committee
Marvin Evans, Editor-Publisher
Thos. L. Blair, Chairman Out-of-State Visitors

Dr. Walker, the secretary, read letters of interest as information to the committee.

Dr. Grady Ross, Chairman of the Entertainment Committee, reported on plans for the speaker, banquet, favors for the banquet, band for the dance, and matters connected. Dr. Walker made a motion that Dr. Ross as chairman of this committee be allowed to use his own discretion as to the expense for entertainment. Dr. Fitzgerald seconded the motion, which was passed.

Dr. Current made a motion that the committee for Entertainment of Out-of-State Visitors be allowed \$150.00 for its work, which motion was seconded by Dr. Walker and passed.

The guest of honor for the 1953 convention was discussed, and Dr. Current made a motion that Dr. Ernest Branch of Raleigh be named the honor guest. Dr. Paul Fitzgerald seconded the motion, which passed.

The subject concerning the possibility of motion-pictures for commercial exhibitors was discussed, and Dr. Paul Fitzgerald, Sr. made a motion that due to the limited facilities and crowded schedule they be prohibited at this time.

Dr. Walker made a motion that Dr. Marvin Evans, Editor-Publisher of the Journal of the North Carolina Dental Society, be authorized to hire a stenotypist for the taking of minutes for the 1953 convention, which motion was seconded by Dr. Fitzgerald and passed.

Dr. Guion read a letter from the Executive Committee of the Third District Dental Society, which was discussed by all members and a resolution was presented by Dr. Fitzgerald that the chairman draft a letter to the Dental School and the Executive Committee, stating the position of the Executive Committee of the North Carolina Dental Society in this matter of Intramural Practice of Dentistry at the University.

There being no further business, the meeting was adjourned.

Bernard N. Walker

Secretary-Treasurer

MEMBERS ATTENDING THE PINEHURST MEETING

MAY 1953

FIRST DISTRICT

Abernethy, David	Matheson, Wm. M.
Baker, Robert N.	Mauney, R. G.
Barker, O. C.	McCall, C. S.
Barringer, M. R.	McCall, C. W.
Beam, C. M.	McCall, R. S.
Bottoms, A. W.	McDaniel, Wm. J.
Boyles, A. V.	McFall, W. T.
Boyles, J. L.	Miller, W. J.
Breeland, W. H.	Moore, Raymond
Brown, C. F.	Moser, J. E.
Candler, C. Z.	Moser, S. E.
Clark, Walter	O'Leary, J. A.
Cline, A. P.	Paisley, R. L.
Cochran, J. D., Jr.	Parker, C. A.
Coffey, Ralph	Parker, W. H.
Connell, E. W.	Peeler, C. M.
Crowell, J. G.	Plaster, H. E.
Cunningham, F. S.	Plaster, Hubert
Current, A. C., Jr.	Pless, C. A.
Current, A. C., Sr.	Poovey, A. C.
Davis, F. W.	Raymer, J. L.
Davis, W. H.	Reece, J. F.
Derby, J. E.	Rhyne, H. S.
Dickson, B. A.	Roberts, Pearce
Diercks, C. C.	Rollins, L. C.
Dudley, D. W.	Sain, H. T.
Edwards, A. C.	Self, F. L.
Edwards, B. F.	Self, I. R., Jr.
Edwards, E. L.	Self, Ruffin
Ezzell, L. L.	Sloop, W. M.
Falls, Ralph	Steelman, S. H.
Forbes, M. M., Jr.	Taylor, Preston
Fritz, C. B.	Truluck, M.
Frye, D. G.	Tuttle, D. M.
Glenn, E. T.	Wells, C. T.
Goodwin, C. J.	Wells, C. T., Jr.
Hargrove, W. F.	Whisnant, C. M.
Hedrick, P. E.	Whisnant, J. F.
Highsmith, C.	Woody, J. L.
Hord, D.	Woody, L., Jr.
Hunt, J. J.	Woody, M. E., Jr.
Isenhour, Sam	Woody, Wm. L.
Jamison, H. C.	Yates, P. P.
Jones, E. A.	Yelton, J. L.
Lawrence, J. D.	Yelton, W. D.
Maddux, N. P.	
Martin, F. E.	

SECOND DISTRICT

Alexander, Geo. S.	Kirk, Wm. S.
Alford, F. O.	Kirkendol, E. C.
Arthur, L. D.	Kiser, J. D.
Ashby, J. L.	Kistler, A. R.
Austin, E. U.	Lentz, B. P.



Here are the new officers of the North Carolina Dental Auxiliary. Seated is Mrs. T. E. Sikes, Greensboro, who succeeds Mrs. H. O. Lineberger, Raleigh, as president. Standing: Mrs. L. D. Herring, Raleigh, historian; Mrs. Walter Clark, Asheville, treasurer; Mrs. Ralph Coffey, Morganton, president-elect; Mrs. C. N. Stone, Greensboro, secretary, and Mrs. E. M. Medlin, Aberdeen, vice-president.

- Barkley, Carl
Barksdale, S. A.
Beavers, D. L.
Beavers, F. C.
Benfield, R. H.
Bentley, C. W.
Biddix, C. F.
Bingham, J. P., Sr.
Black, A. R.
Black, V. A.
Blackburn, C. A.
Blair, T. L.
Brawley, Boyce
Brooke, H. L.
Bumgardner, A. S.
Bumgardner, L. F.
Byerly, R. T.
Campbell, R. B.
Casey, R. P.
Cash, A. H.
Chamberlain, A. C.
Chandler, F. H.
Conduff, Duke
Cox, Vernon
Crotts, H. K.
Current, W. C.
Davis, J. V., Jr.
Duncan, S. C.
Ezzell, J. W.
Farthing, J. C.
Fox, Burke
Fox, M. O.
Fox, N. D.
Freedland, J. B.
Funderburk, E. M.
Furr, C. E.
Galarde, A. J.
George, R. A.
Grady, L. V.
Graham, Jim
Guion, J. H.
Hamer, T. N.
Harrell, R. B.
Harrelson, H. C.
Hartness, J. F.
Harwood, Brooks
Heseman, Gary
Heinz, J. W.
Helsabeck, C. R., Jr.
Hodgin, O. R.
Hoffman, M. J.
Holcomb, D. W.
Holland, J. M.
Holliday, R. H.
Holshouser, L. C.
Hoover, D. C.
Howell, A. E.
Hull, P. C., Jr.
Irwin, John
Jackson, D. A.
Jarrett, C. H.
Levine, H. H.
Long, Robt.
Masten, Guy M.
Masten, R. E.
McClung, J. A.
Melvin, R. P.
Mendenhall, F. C.
Montgomery, D. O.
Morris, D. W.
Morris, E. C.
Moser, K. B.
Moses, J. E.
Motley, E. R.
Nicholson, J. H.
Nisbet, T. G.
Nissen, E. C.
Owen, O. W.
Parker, H. C.
Parks, C. M.
Patterson, R. M.
Peeler, Lackey
Perry, W. S.
Pegg, F. N.
Petree, R. E.
Pratt, F. P.
Reece, J. P.
Reeves, H. P., Jr.
Rehm, J. A.
Reid, C. S.
Ross, Grady
Schiebel, E. C.
Schmucker, R.
Secretst, W. A.
Segal, S. H.
Sherrod, W. B.
Shoaf, Reynolds
Short, L. H.
Slaughter, F. C.
Southand, F. J.
Sowers, Wade
Spillman, J. H.
Spoon, R. E.
Stone, F. H.
Stroup, P. A., Jr.
Taylor, L. E.
Taylor, R. G., Jr.
Taylor, W. C.
Thompson, H. W.
Thompson, L. R.
Thurston, Steve
Tomlinson, F. N.
Trivette, L. P.
Tuttle, R. D.
Walker, B. N.
Walker, F. H.
Wall, L. E.
Waller, D. T.
Webster, Ben H.
Weeks, W. P.
Wertz, J. L.
Wharton, R. G.

Jarrett, R. F.
 Jones, B. E., Jr.
 Joyner, O. L.
 Kendrick, Vaiedn
 Kendrick, Z. Vance
 Kirby, O. B.
 Kirk, F. W.

White, T. L.
 Wilson, R. W.
 Yelton, Wm. F.
 Yokeley, G. W.
 Zimmerman, H. S.
 Zimmerman, J. W., Jr.
 Pharr, J. R.

THIRD DISTRICT

Adams, C. A.
 Adams, R. G.
 Alexander, W. E.
 Andreve, K. I.
 Atwater, Frank
 Bell, J. T.
 Betts, J. S.
 Bitler, G. F.
 Blair, Mott
 Bowen, C. L.
 Bowling, W. W.
 Bradsher, J. D.
 Brauer, J. C.
 Burket, J. F.
 Burns, Ray
 Burns, Wm. T.
 Butler, Estes
 Butler, Luther
 Carr, D. T.
 Carr, H. C.
 Chamberlain, V. F.
 Chapin, M. E.
 Cherry, M. L.
 Coble, L. G.
 Crank, J. C.
 Daniels, L. M.
 Darden, T. H.
 Dilday, J. S.
 Dixon, T. L.
 Edwards, L. M.
 Ellerbe, J. H.
 Erwin, D. H.
 Evans, M. R.
 Gale, John
 Gay, S. P.
 Getsinger, D. M.
 Gilbert, Wm. B.
 Gilliam, F. E.
 Graham, C. A., Sr.
 Griffin, W. K.
 Hall, W. A., Jr.
 Harris, G. V.
 Hart, S. T.
 Henson, J. L.
 Hinson, Bill
 Hinson, J. Y.
 Hoppers, J. E.
 Horton, Charles
 Howell, J. B.
 Hughes, J. H.
 Hughes, J. T.

Lauten, J. J.
 Long, H. S.
 Malone, F. J.
 McCall, S. H.
 McIntosh, J. A.
 Medlin, E. M.
 Menius, J. W.
 Miller, C. I.
 Moore, H. W.
 Murray, H. V.
 Neal, W. E.
 Newman, J. B.
 Newton, M. E.
 Overcash, R. F.
 Page, L. G.
 Patterson, C. E.
 Patterson, H. M.
 Poindexter, C. C.
 Poindexter, C. W.
 Presnell, O. L.
 Pressly, W. A., Jr.
 Pringle, Ross
 Richardson, R. E.
 Roberts, Ernest
 Scott, G. G.
 Senter, J. C.
 Shaffer, S. W.
 Sheffield, Neal
 Sigmon, J. W.
 Sikes, T. E., Sr.
 Sikes, T. E., Jr.
 Slott, E. F.
 Sockwell, C. L.
 Southworth, J. D.
 Sowter, J. B.
 Stanford, A. R.
 Stone, C. N.
 Stonestreet, F. M.
 Stubbs, J. M.
 Sturdevant, C. M.
 Sturdevant, R. E.
 Sugg, C. H.
 Suggs, J. R.
 Teague, C. H.
 Teague, E. R.
 Thomas, J. T.
 Underwood, F. H.
 Underwood, R. L.
 Walker, M. E.
 Warlick, R. B.
 Westrick, C. M.

Hunsucker, H. M.
 Hunter, G. C., Jr.
 Hunter, M. R.
 Johnson, N. C.
 Karesh, H.
 Kilpatrick, R. E.
 Kirkland, G. F.
 Kistler, C. D.
 Lasley, J. T.
 Ross, N. F.
 Saunders, W. L.

Wheeler, C. M.
 Wheless, J. R.
 Whittington, P. B., Jr.
 Wilkins, R. A.
 Williamson, J. F.
 Willis, G. R.
 Wolfe, C. B.
 Zimmerman, L. H.
 Zimmerman, L. R.
 Zimmerman, T. R.

FOURTH DISTRICT

Abernethy, C. E.
 Allen, H. L.
 Bain, C. S.
 Baker, E. D.
 Barber, A. D.
 Beam, R. S.
 Bell, V. E.
 Biddell, F. H.
 Blalock, C. A.
 Bobbitt, S. L.
 Branch, E. A.
 Branch, W. H.
 Branham, J. W.
 Broughton, E. H.
 Byrd, R. T.
 Byrd, W. M.
 Chamblee, H. R.
 Clements, R. D.
 Collins, T. G.
 Coltrane, J. F.
 Cotter, P. E.
 Denning, J. N.
 Dennis, G. E.
 Eagles, R. L.
 Eakes, S. E.
 Edwards, James
 Edwards, J. R., Sr.
 Edwards, J. R., Jr.
 Finch, R. E.
 Finch, S. J.
 Finch, W. H.
 Fitzgerald, Paul, Jr.
 Fleming, A. H.
 Fleming, J. M.
 Gardner, J. M.
 Hair, J. S.
 Hair, L. G.
 Hale, G. F.
 Hale, J. P.
 Hargrove, A. W.
 Harrell, P. T.
 Hendricks, F. E.
 Herring, L. D.
 Hertogg, S. R.
 Hooper, G. L.
 Horton, R. L.
 Hulin, James F.

Lawrence, E. N.
 Lee, Wm. G.
 Ligon, J. H., Jr.
 Lindsay, K.
 Marshall, P., Jr.
 Marshburn, J. A.
 Martin, W. T.
 Massey, L. M.
 Massey, W. J., Jr.
 McKaughan, Gates
 McKay, S. R.
 McRae, Walter
 Moore, L. J.
 Moore, L. J., Jr.
 Nelson, T. E.
 Nicholson, M. P., Jr.
 Noble, R. J.
 Olive, R. M., Jr.
 Olive, R. M., Sr.
 Osborne, C. R., Jr.
 Paschal, L. H.
 Pearce, O. R., Jr.
 Pearce, J. A.
 Pearson, Alex
 Pearson, P. L.
 Phillips, A. A.
 Pleasants, Marvin
 Pridgen, D. L.
 Pringle, J. M.
 Pruitt, J. F.
 Rankin, W. W.
 Renfrow, R. R.
 Roberts, C. E.
 Sanders, C. W.
 Seifert, D. W.
 Smith, E. L.
 Smith, M. R.
 Smith, Newton
 Stephenson, G. W.
 Stevens, C. W.
 Swain, John, Jr.
 Swindell, J. E.
 Tew, J. J.
 Thomas, J. E. L.
 Todd, H. A.
 Towler, S. B.
 Townsend, G. L.

Hunter, T. M.
 Jackson, W.
 Jernigan, J. A.
 Johnson, J. C.
 Johnson, K. L.
 Johnson, M. L.
 Jones, M. T., Jr.
 Jones, R. S.
 Jordan, J. F.
 King, D. D., Jr.

Turlington, R. A.
 Underwood, A. D.
 Underwood, N. H.
 Waddell, M.
 Whitehead, J. W.
 Williams, H. R.
 Woltz, W. L., Jr.
 Wooten, C. L.
 Young, T. L.

FIFTH DISTRICT

Aldridge, M. W.
 Allen, S. V.
 Anderson, G. N.
 Barden, R. B.
 Barker, C. T.
 Beasley, B. F.
 Bland, A. B.
 Boseman, Dewey
 Bowden, H. B.
 Broughton, J. D.
 Carson, J. R., Jr.
 Chamblee, F. G.
 Civils, H. F.
 Civils, H. W.
 Cooke, C. S.
 Daniel, R. A., Jr.
 Denton, E. C.
 Dowdy, J. H.
 Duke, J. F.
 Dupree, L. J., Jr.
 Dupree, L. J., Jr.
 Early, A. C.
 Eatmon, Edward
 Eatmon, C. D.
 Edwards, H. A.
 Edwards, Z. L., Jr.
 Edwards, Z. L., Sr.
 Eure, D. J.
 Fales, A. R.
 Fitzgerald, Paul, Sr.
 Fuerst, H.
 Furr, J. E.
 Garriss, M. A.
 Gilbert, R. H.
 Gray, W. H.
 Griffin, W. S.
 Hamilton, A. L.
 Harris, Frank
 Henson, Donald
 Hooks, Oscar
 Houston, Ben
 Hunt, Fred
 Inscoc, H. G.
 Jennette, A. T.
 Johnson, A. D.
 Johnson, B. McK.

Johnson, C. B.
 Johnson, Wm. H.
 Jones, P. E.
 Ketcham, Wm. S.
 Kilpatrick, J. M.
 Kornegay, J. M.
 Large, N. D.
 Laxton, W. P.
 Lee, Jim
 Lilley, M. M.
 Massey, M. B.
 Minges, C. E.
 Minges, C. R.
 Morrison, B. R.
 Mustian, W. F.
 Overman, Lee
 Pigford, G. E.
 Poole, J. G.
 Ralph, W. T.
 Raspberry, W. E.
 Rudder, W. L.
 Seitter, D. B.
 Smith, A. L.
 Smith, J. H.
 Smith, J. C.
 Smith, T. A.
 Smithson, T. W.
 Spear, Herbert
 Thomas, C. A.
 Thompson, H. K.
 Tomlinson, R. S.
 Tucker, W. W.
 Weathersbee, R., Jr.
 Wells, D. L.
 Whitehurst, R. L.
 Wilkins, R. A.
 Williams, R. E.
 Wilson, O. L.
 Wooten, A. L.
 Wright, Dan
 Wright, E. K., Jr.
 Young, H. L.
 Young, W. H.
 Zaytoun, H. S.
 Zealy, J. M.

JUNIOR A.D.A. MEMBERS

Alspaugh, L. S.	Hussly, T. E.
Ausley, M. B.	Jackson, S. K.
Barber, Leonard, Jr.	Johnston, C. M.
Bergmanis, Ruta	Kluttz, R. F.
Biddell, Alex	LaSalle, L. T.
Bishop, E. L.	Lee, L. W.
Bland, Don	Leggette, Jim
Bliss, Rupert	Lewis, J. B.
Brooks, R. E.	Lineberger, Henry, Jr.
Buchanan, F. A.	Linville, Walter, Jr.
Byerly, C., Jr.	Long, J. S.
Cameron, L. A.	Lowe, W. J.
Clark, B. G., Jr.	Lupton, C. R.
Clark, Fred	Massey, Z. K.
Clayton, S. F.	Matthews, K. L.
Clinard, R. W.	McCall, C. N.
Cline, A. P., Jr.	McGowan, D. M.
Coble, A. V.	Meekins, Archie
Cole, Hugh, Jr.	Meggison, L. P.
Conrad, C. R.	Mitchell, D. L.
Corderman, R. C.	Moore, W. H.
Corl, Marshall	Phillips, G. M.
Cox, Jim	Pless, C. A., Jr.
Crawford, J. A.	Poole, R. H., Jr.
Daniel, Frank	Price, Dwight
Daniel, R. L.	Ralls, M. L.
Derby, J. E.	Reese, G. L.
Dixon, J. H.	Reid, T. B., Jr.
Draughon, Donald	Richardson, Maurice
Edwards, George	Riddle, W. F.
Evans, T. E., Jr.	Rodgers, J. F.
Fitterman, Israel	Rogers, J. H.
Floyd, Dan	Sager, F. N.
Foust, J. A.	Scott, L. G.
Fowler, W. F.	Sheffield, Neal, Jr.
Furr, Robert	Sluder, T. B., Jr.
Gainey, R. H.	Smith, J. R.
Gaither, F. G.	Smith, J. W.
Girard, J. W., Jr.	Stanley, L. B.
Gobbel, J. T., Jr.	Stoddard, A. L.
Gooding, C. C.	Strickland, Wm. D.
Graham, F. R.	Sugg, R. W.
Grahl, C. L., Jr.	Taylor, C. L.
Gregory, H. A.	Ward, J. A.
Griffin, L. E., Jr.	Ware, Bill
Hall, C. B.	Warren, R. A.
Hall, T. A.	Warton, R. C.
Harless, C. F.	Waynick, G. E., Jr.
Harrell, D. B., Jr.	Westmoreland, J. H.
Harris, P. F.	Whitehurst, R. C.
Heath, L. K.	Wiggs, Wm. J.
Hinkle, D. R.	Williams, E. P.
Hinson, Tom	Williams, J. H., Jr.
Holland, M. W.	Williford, Wm. E.
Hord, D. B.	Wilson, Curtis
Hughes, C. W.	Yates, R. A.
Hull, C. A.	Young, W. K.
Hunt, R. F., Jr.	



The North Carolina Dental Hygienists Association's new officers are left to right: Miss Emma Mills, Winston-Salem, vice-president; Mrs. Nancy Horton, Henderson, retiring president; and Miss Lucy Williams, Gastonia, incoming president.

DENTAL HYGIENISTS

Beat, Alberta M.	Leskosky, Nancy
Bowman, Maxine	Mills, Emma
Burns, Winifred B.	Stimpsay, M. G., Mrs.
Dinwiddie, Barbara	Tinkham, Barbara
Hare, Kitty	Tuttle, Mary Louise
Hiener, Jean	Van Slyke, Karen
Horton, Nancy	Williams, Lucille
Jones, Margaret	

DENTAL ASSISTANTS

Barnard, Polly D.	Matthews, Cleo
Bass, Lois R.	McLomb, Naomi
Bayer, Rose	Miller, R. T., Mrs.
Benton, Mary E.	Parrish, Myra
Callicutt, Lillian	Poole, Janet
Carpenter, Martha	Pope, Lake
Caske, Peggy	Pope, Marie
Davis, Dorothy	Primm, Louise
Dunnagan, J. G., Mrs.	Reaves, Nellie
Ehler, Lucille M.	Reed, Bess K.
Frazer, Jeanne	Reese, Alice
Frazier, Marty	Richardson, Louise
Freeman, Betty	Rierson, Helen
Garriss, M. A., Mrs.	Rierson, Mary W.
Giles, Eleese	Roberts, Jane
Godwin, Montine F.	Shackleford, Nancy
Greene, Peggy	Starrett, Allen, Mrs.
Hayden, Ann	Suit, Sylvia J.
Herring, Lorna S.	Thompson, Jerry
Howell, Nancy	Troxler, Catherine
Johnson, Helen	Veach, Mona
Kennedy, Eula Faye	White, Jimmi
Leinback, Willie	Wilson, Mildred
Marlowe, Athelene P.	Zedaker, Edna

VISITORS

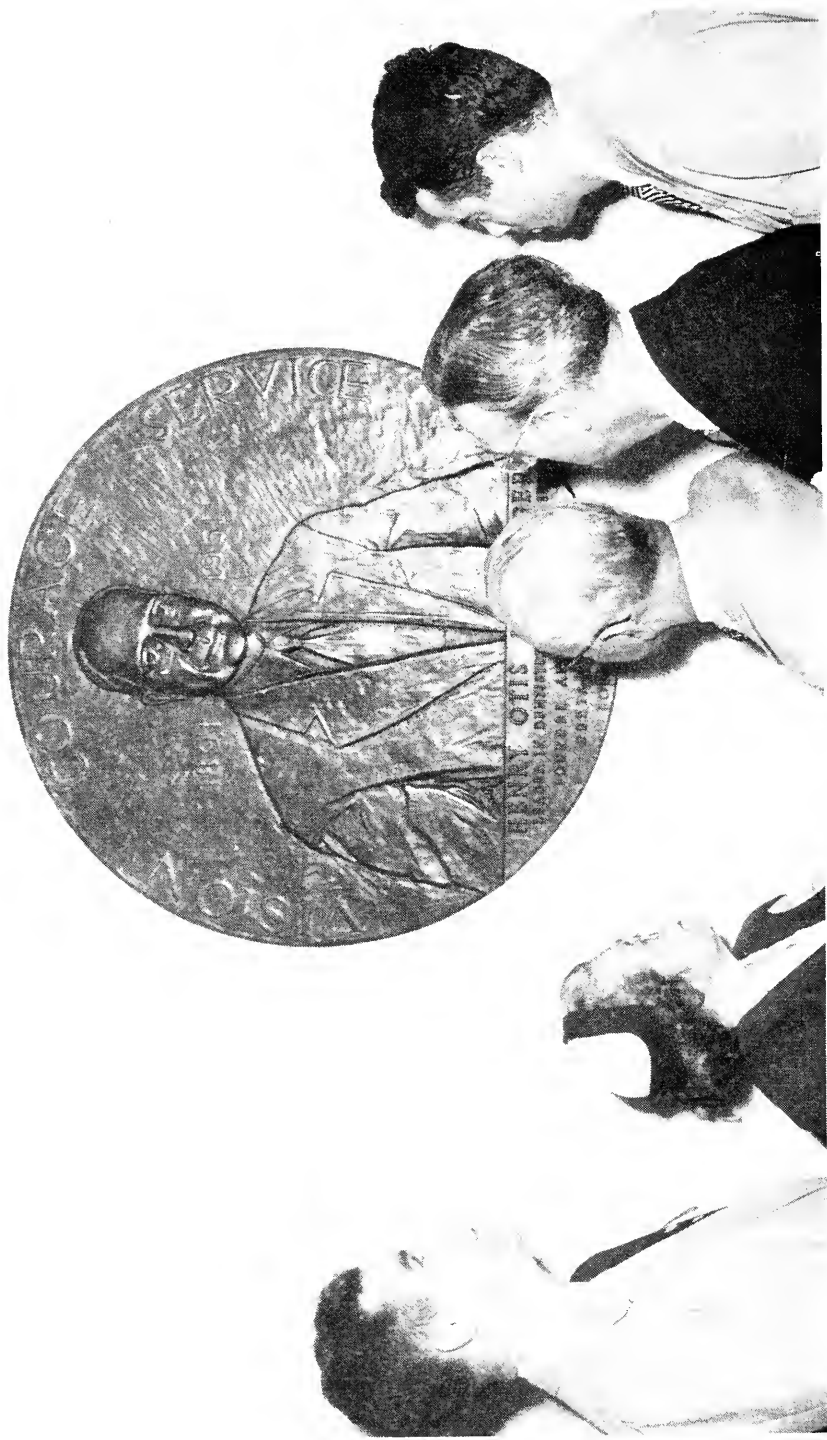
E. G. Apple	G. R. Harrison
Ben L. Arrington	J. B. Hawkins
Mrs. Leonard Barber, Jr.	Dr. W. H. Hayden
Mrs. Ann Bennett	M. Henry
H. M. Bennett	Betsy Hewitt
Dr. H. M. Berry, Jr.	Ed Higgason
Mrs. Harrison Berry	Mrs. Howard B. Higgins
Dr. Tristram W. Bethea	Howard B. Higgins
Mrs. Tristram W. Bethea	Mrs. Wm. Nixon Holmes
Mrs. Glenn F. Bitler	Wm. Nixon Holmes
Mrs. E. D. Boovy	F. Tryon Horton
Mrs. Agnes Bowling	J. Fred Horton
J. P. Broadus	Wm. W. Houser
Hugh Branch	Dr. Marjorie Houston
Dr. Otto W. Brandhorst	Clarence Hurst
Harold Brown	Dr. J. E. John
George M. Brown	Mrs. J. E. John
Bill Bruckner	Ann Johnson
Dr. E. G. Bumgardner	Dr. D. W. Jones
Mrs. E. G. Bumgardner	Roy M. Jones
Elsie Cameron	Mrs. J. F. Jordan
Ralph F. Campbell	J. J. Jordan
Earl Carson	Harold Kehor

Bruce Carter
Mrs. Bruce Carter
Dr. R. E. Christmus
Dwight L. Clark
Dr. Henry T. Clark
Maj. Thomas R. Cole
Dr. Raquel Collado
Thomas R. Collins
Dr. P. L. Connor
Mr. L. Cooper
E. D. Crane, Jr.
Luther Creel
Chas. Crews
Harold B. Crews
Mike Crisci
J. L. Crumpton
Mrs. L. H. Davenport
L. H. Davenport
Mrs. F. W. Davis
Kent Davis
Mary Davis
Mrs. Walter Davis
Mr. Roy Denton
Mrs. Clinton Diercks
Dr. Norman J. Duncan
Mrs. S. E. Eaker
Dr. Richard J. Eamich
Leroy Ennis
C. W. Eurl
John E. Fauber
J. R. Fenner
Paul Ferrell
Mrs. R. W. Fields
R. W. Fields
Mrs. Elizabeth B. Finch
John W. Fleming
Mrs. John Fraser
Dr. John E. Fraser
Harold B. Friedman
Mrs. Conrad B. Fritz
Jimmy Furr
Mrs. J. W. Gallagher
Dr. J. W. Gallagher
Mrs. John M. Gardner
Mrs. P. B. Hair
Dr. P. B. Hair
Mrs. J. P. Hale
Dr. C. B. Hall
Dr. J. K. Halladay
Allan F. Hancock
Chas. Harney
Peggy Harney
Floyd Harper, Jr.
Mrs. Henry C. Harrelson
I. H. Harris
Bob Phillips
Mrs. Auburn L. Poovey
Charles Pressler
E. C. Proctor
R. W. Rasmuson

Milton S. Kennedy
Mrs. Ralph E. Kilpatrick
Mrs. Wm. S. Kirk
Marion E. Lauson
Albert E. Lawrence
Dr. F. O. Lentz
Mrs. Victor S. Leocha
Victor S. Leocha
Roy L. Lindahl
Heath Little
Mrs. P. Livingston
O. E. Longwell
Dr. Walter H. Luers
Mrs. Harry Lyons
Harry Lyons
R. W. Macry
L. S. Matthews
Lt. Col. W. J. McAllister, U.S.A.F.
Cdr. W. H. McCake
Mrs. C. S. McCall
G. W. McCall
Mrs. S. H. McCall
Dr. Wm. W. McDowell
Jean McKay
Mrs. James McLaurice
Charles S. Mehl
Ruth E. Mehl
Dorothy Mencher
Lewis Mencher
Miss Carolyn Mercer
Mrs. L. K. Miller
L. K. Miller
Mrs. C. R. Minges
Betty P. Moore
I. W. Mohr
Dick Molten
G. E. Moon
Mrs. D. O. Montgomery
Dr. Joseph M. Moses
Mrs. John Moses
Mrs. Wallace F. Mustian
Dr. Robert M. Nelson
Felix Neri
F. W. Newman
Dr. G. C. Nichols
Miss Dorothy Nicholson
Joe Nixon
Fred Noble
Rebecca Norman
Roy Norton
P. M. Oliver
F. F. Paradise
Paul W. Paronen
H. E. Payne
K. R. Pfeiffer
Dr. John B. Todd
Mrs. G. L. Townsend
Dick Travers
Frances Ellen Walker
Robert Walker

D. F. Rentz
Fred Rich
Mrs. Richard E. Richardson
Nelson Figgs
W. B. Rosevear
Capt. Charles Rosoff
Dr. C. E. Saunders
Dr. Ralph Schimensky
Frank Shoaf
Pullen Sizer
Harriet Smith
Marcus R. Smith, Jr.
Paul Smith
Mrs. H. Spear
W. E. Steele
Mrs. G. W. Stephenson
Millard G. Stimpson
Robert P. Strekley
Henry Swanzy
B. W. Taylor
Alex J. Tchinski
C. A. Thompson
Mary Tillery

Bill Warlick
W. Warne
Carey Weatherfort
Ray Weathers
Mrs. Pearl Webb
M. Weisensel
H. H. Wellman
French Wells
Gordon White
Dr. Ben H. Williams
Reid Willis
Lt. Col. E. R. Wilmk
Charlie Wilson
Margaret Woodward
Robert Woodward
Mrs. M. E. Woody, Jr.
Mrs. Wm. L. Woody
Fred Woolbright
Roland Wooten
Albert Wray
Eugene B. Wyman
Mrs. W. D. Yelton



Shown examining the plaque of Dr. Henry Otis Lineberger presented by the dentists of North Carolina are: James and Mrs. Lineberger, son and widow; Dr. A. C. Current, President of the N. C. Dental Society; Dean Brauer; and Henry Otis Lineberger, Jr., a student at the School of Dentistry.

Tribute to Dr. Henry Otis Lineberger

We have gathered here today to assist in the dedication of a great health center. As we gaze at this great collection of bricks and mortar so nobly assembled on this campus we may, in our frail, human way, think that these imposing edifices are the BE ALL and END ALL of our objective, sought and desired these many years—but actually they are the smallest part of that objective,—for of themselves they are nothing,—merely earth forms which may some day moulder away to the dust whence they came.

It is rather what they stand for as tools for the betterment of the lot of mankind that makes them valuable. And the real substance of their existence is not the materials of which they are accomplished, but rather the brains and sweat and blood of those whose minds conceived them and their uses, and whose energies were expended in convincing other men of their necessity.

Foremost in the ranks of those who poured their lifeblood into this great humanitarian project was one known to all of us as a professional colleague and devoted friend,—a man whose spirit must be present here today to witness this formal conclusion of the project for which he labored so long and so steadfastly,—our departed brother, Henry Otis Lineberger.

Born in the great Southland State of South Carolina, Henry Lineberger transferred at the early age of twelve to North Carolina, where he spent the remainder of his life within its borders. Educated in the public schools of Gastonia and Trinity College he departed from it,—of necessity—for the few years necessary to acquire the formal training for his chosen vocation. Graduating with honor from the dental school of the University of Louisville (at that time we had no dental school in North Carolina), he returned immediately to Raleigh and there entered upon his professional career, interrupting it only to answer the call of his country for overseas service in World War I.

Recognizing that service to his fellow-man could not be performed fully within the confines of this office alone, he threw himself into activities of all kinds—particularly those where his efforts would be of benefit to his fellow-man. Others can speak with glowing tongue of his many works within his church and community, but today let me recollect principally those of his activities connected with the profession he loved and served so well.

No honor within the gift of his fellow dentists of North Carolina was denied him, and for his part he was never known to shirk or avoid an assignment, no matter how laborious it might be. No year passed but that his name is found upon the roll of one or more committees of the North Carolina Dental Society and even in the twilight of his life, when he was still clothed with many high honors conferred by members of high rank in the profession beyond the confines of the State, he eagerly

embraced the exhausting committee work which is the day to day motive power of any organization—work which another might well have left to younger men feeling that his contributions had been made.

Thus he served as Secretary of his Society, as its Editor, as a member of its Board of Examiners, and as its President. For uncountable years he served in its governing bodies and for nearly as many he represented his state in the House of Delegates of the American Dental Association. But with all this activity, with all this honor, he kept his eyes fixed upon a star which would illumine his native state, the establishment within the University of a school which would provide adequate training for future members of his profession. To this end as President of the State Society he appointed the first committee to seek the establishment of a dental school. And in after years he never forgot his objective. In 1947 he accepted the Chairmanship of this committee and with unceasing study, untiring effort and unflagging will he drove to his final goal. As a result, today we stand in this beautiful setting, gained through his devotion, to pay a lasting tribute to his memory.

No memorial in bronze or mortar will do more than call to mind of the passer-by the name of Henry Lineberger. But in the students, who from this year forward will leave these halls for the service of mankind we will find his real memorial a living, vital, unbroken chain which throughout the ages will be testimony to his dream and to his labors.

Notwithstanding that this ever-flowing group will be his real testament, we, his colleagues in the North Carolina Dental Society feel impelled to commemorate in our small way his lifetime of service and effort. To this end, therefore, we present to the School of Dentistry this Bronze Relief Plaque, that it may hang within these sacred walls and imbue them with the spirit which made Henry Lineberger ever a laborer in the vineyard of service to his fellow-man.

Prepared by Dr. Paul E. Jones and presented at memorial exercises by Dr. A. C. Current, Thursday, April 23, 1953, in the Lobby of School of Dentistry, Chapel Hill.

Acceptance of The Lineberger Memorial Plaque

John C. Brauer, Dean, Representing the University and the Faculty of the School of Dentistry, Thursday, April 23, 1953

It is appropriate and timely, indeed, that during these historic days of the dedication ceremony, we pause for a few moments to do honor and to further recognize one of our great leaders of the past. In honoring Dr. Henry Otis Lineberger we honor dentistry, and likewise, one of the fine and noble women of our day, Mrs. Lineberger, who was the guiding spirit and co-worker of this great man, known and admired throughout this land. No man could have achieved the distinction and expressed such versatility in service to humanity without the love and counsel of a great woman, with a Christian character and dynamic interest in life.

On behalf of the Trustees and the Administration of the University of North Carolina and the faculty of the School of Dentistry, I herewith accept the plaque of Dr. Henry Otis Lineberger, from the dentists of North Carolina and of America, as a gift, and as a tribute, and in memory of one of our great leaders. He was one of my immediate friends and advisors, who gave me courage, vision and inspiration. His words of wisdom, embraced with years of experience in civic and professional affairs, lead me on today, as they will lead me on in the days to come.

May all who enter this building catch the spirit of this great man who has walked among us, and may this memorial to Dr. Lineberger have a profound influence for good and greater achievement upon the lives of all our students, professional colleagues, and co-workers.

FINANCIAL AND ACTIVITIES REPORT DENTAL FOUNDATION OF NORTH CAROLINA, INC.

In order that the general membership of the North Carolina Dental Society, and other interested professional and civic leaders, may learn of the progress, development and activities of the Dental Foundation of North Carolina, Incorporated, the following activities and financial statements are listed: *First Research Project Sponsored by Foundation:* The Executive Committee of the Dental Foundation approved a research project which was activated, within the Department of Biochemistry and Nutrition, and headed by Professor James Andrews and Mr. M. K. Berkut. It relates to the *metabolism of fluorides and tooth structure*. The questions and problems surrounding prevention and control of dental caries, relating to the fluorides, are vital to every dentist and to every citizen. The resources of the Dental Foundation, made possible by your contributions and vision, permit further research in this area which is fundamental to all mankind. The total grant, to extend throughout this coming academic year, was \$2214.00.

Vocational Guidance Projects Sponsored: Another vital problem is that pertaining to manpower in the dental profession. In North Carolina, according to the latest 1953 report of the Bureau of Economic Research and Statistics of the American Dental Association, there is only one dentist to every 4019. In the United States there is a ratio of 1:1691. The Selective Service System (draft laws), as well as other factors, is reducing the number of qualified individuals for the study of dentistry. Accordingly, it was deemed appropriate that the Dental Foundation sponsor a Vocational Guidance Program by (1) preparing and printing a pamphlet "A Career in Dentistry," and (2) making such pamphlets available to the high schools of the state. This pamphlet, and one pertaining to the Dental Hygienist, also, is available to the dentists for any public relation activities or meetings. The total amount allocated to this project by the Executive Committee was \$550.00.

Other Research Projects: Other possible research projects in Oral Pathology, Periodontology, Orthodontics and Pedodontics will be considered in the coming year. Reports to the Board of Directors and members relating to the two projects now underway, and others, will be sent on an annual basis.

DENTAL FOUNDATION OF NORTH CAROLINA, INC. FINANCIAL STATEMENT

FROM JULY 1, 1952 to JUNE 30, 1953

Operations

Receipts:

Donations Received	\$17,138.50	
Interest on Investments	391.32	\$17,529.82

Disbursements:

Operation Expenses		
Salaries and Wages	\$ 712.40	
Supplies	61.38	
Postage and Telephone	39.65	
Printing and Binding	1,782.19	
General Expense	95.59	2,691.21

Gross Income for Period		\$14,838.61
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Grants:

U.N.C. Dept. of Biochemistry	\$ 2,214.00
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Net Increase for Period	\$12,624.61
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Fund Balance July 1, 1952	27,548.75
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Fund Balance June 30, 1953	\$40,173.36
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Inventory of Assets

Held by American Trust Company, Charlotte, N. C.

Cash:

Library Fund	\$ 15.00	
Memorial Fund	473.00	
Visual Education Fund	62.00	
Student Loan Fund	710.00	
Memorial Book Fund	700.00	
General Fund	14,128.44	\$16,088.44

U. S. Treasury Notes 2 1/8 %	4,000.00
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U. S. Treasury Bonds 2 3/4 %	15,000.00
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Cash in Investment Account	484.92
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Held by University of North Carolina		\$35,573.36
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Endowment and Trust Fund:

The Sally A. Hunt Memorial Fund	\$ 1,600.00	
Woodward-Fleming Scholarship Fund	3,000.00	\$ 4,600.00

Total Assets		\$40,173.36
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DENTAL FOUNDATION OF NORTH CAROLINA, INC.

Summary of Operations from November 1950 to June 30, 1953

	Nov., 1950 to June 30, 1951	July 1, 1951 to June 30, 1952	July 1, 1952 to June 30, 1953	Total To Date
Fund Balance Beginning of Period	None	\$ 7,191.68	\$27,548.75	None
Income:				
Donations	\$ 7,439.65	\$22,696.15	\$17,138.50	\$47,274.30
Miscellaneous Receipts	272.00	177.96		449.96
Interest on Investment		93.60	391.32	484.92
Total Income	\$ 7,711.65	\$22,967.71	\$17,529.82	\$48,209.18
Disbursements:				
Operating Expense	\$ 519.97	\$ 2,260.64	\$ 2,691.21	\$ 5,471.82
Grants—Health Center Display		350.00		350.00
Biochemistry Research			2,214.00	2,214.00
Total Disbursements	\$ 519.97	\$ 2,610.64	\$ 4,905.21	\$ 8,035.82
Balance at End of Period	\$ 7,191.68	\$27,548.75	\$40,173.36	\$40,173.36
Increase (—Decrease)	\$ 7,191.68	\$20,357.07	\$12,624.61	\$40,173.36
Cost of Operation	7%	11%	28%	17%
Number of Donors	42	395	294	731
Average Donation	\$ 177.00	\$ 57.00	\$ 58.20	\$ 64.67
Total Assets (Including Pledges and Intentions)*	\$28,894.00	\$91,526.45	\$89,580.56	\$89,580.56

* Not included are pledges receivable outstanding to 1956 amounting to \$49,407.20.

* Does not include several Wills, which have been designated to include the Dental Foundation of North Carolina, Inc.

JOHN C. BRAUER, *Secretary-Treasurer*

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